| Fill in this information to identify your case: |  |                                      |
|---|--|--------------------------------------|
| United States Bankruptcy Court for the :        |  |                                      |
| NORTHERNDistrict of _ILLINOIS(State)            |  |                                      |
| Case Number (If known):                         | Chapter you are filing under: Chapter 7 Chapter 11 Chapter 12 Chapter 13 | ☐ Check if this is an amended filing |

## Official Form 101

## **Voluntary Petition for Individuals Filing for Bankruptcy**

12/15

The bankruptcy forms use you and Debtor 1 to refer to a debtor filing alone. A married couple may file a bankruptcy case together-called a joint case-and in joint cases, these forms use you to ask for information from both debtors. For example, if a form asks, "Do you own a car," the answer would be yes if either debtor owns a car. When information is needed about the spouses separately, the form uses Debtor 1 and Debtor 2 to distinguish between them. In joint cases, one of the spouses must report information as Debtor 1 and the other as Debtor 2. The same person must be Debtor 1 in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

| Part 1:          | Identify Yourself  |                            |   |
|------------------|--|----------------------------|---|
|                  |  | About Debtor 1:            | About Debtor 2 (Spouse Only in a Joint Case): |
| 1. Your          | full name  |                            |   |
| gover<br>identif | the name that is on your<br>nment-issued picture<br>īcation (for example,<br>Iriver's license or | Gregory First name Stephen | First name                                    |
| passp            |  | Middle name                | Middle name                                   |
| identif          | your picture ication to your meeting   | Capra Last name            | Last name                                     |
| with th          | ne trustee.  | Suffix (Sr., Jr., II, III) | Suffix (Sr., Jr., II, III)                    |
| 2. All ot        | ther names you   |                            |   |
| have<br>years    | used in the last 8   | First name                 | First name                                    |
|                  | e your married or<br>n names.  | Middle name                | Middle name                                   |
|                  |  | Last name                  | Last name                                     |
|                  |  | First name                 | First name                                    |
|                  |  | Middle name                | Middle name                                   |
|                  |  | Last name                  | Last name                                     |
| your             | the last 4 digits of<br>Social Security  | XXX - XX                   | XXX - XX                                      |
| Indivi           | er or federal<br>dual Taxpayer<br>fication number  | OR                         | OR  |
| 100110           |  | <b>9</b> xx - xx           | <b>9</b> xx - xx                              |

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Document Capra Gregory Stephen Debtor 1 Case Number (if known)

|    |  | About Debtor 1:   | About Debtor 2 (Spouse Only in a Joint Case):   |
|----|--|---|---|
| 4. | Any business names and Employer Identification Numbers (EIN) you have used in the last 8 years Include trade names and doing business as names | Business name  Business name  EIN  EIN  | Business name Business name EIN  EIN  |
| 5. | Where you live   |   | If Debtor 2 lives at a different address:   |
|    |  | 8804 W. 140st  Number Street  Unit 1C   | Number Street   |
|    |  | Orland Park  City State  COOK  County   | City State ZIP Code  County   |
|    |  | If your mailing address is different from the one above, fill it in here. Note that the court will send any notices to you at this mailing address. | If Debtor 2's mailing address is different from the one above, fill it in here. Note that the court will send any notices this mailing address. |
|    |  | Number Street   | Number Street   |
|    |  | P.O. Box  | P.O. Box  |
|    |  | City State ZIP Code   | City State ZIP Code   |
| 6. | Why you are choosing this district to file for bankruptcy.   | Check one:  Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.                    | Check one:  Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.                |
|    |  | have another reason. Explain. (See 28 U.S.C. § 1408   | I have another reason. Explain. (See 28 U.S.C. § 1408   |

Debtor 1

Gregory

Stephen

Document

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Capra Case Number (if known) \_ Last Name Part 2: **Tell the Court About Your Bankruptcy Case** Check one. (For a brief description of each, see Notice Required by 11 U.S.C. § 342(b) for Individuals The chapter of the Filing for Bankruptcy (Form 2010)). Also, go to the top of page 1 and check the appropriate box. Bankruptcy Code you are choosing to file Chapter 7 under ☐ Chapter 11 ☐ Chapter 12 ☐ Chapter 13 How you will pay the fee I will pay the entire fee when I file my petition. Please check with the clerk's office in your local court for more details about how you may pay. Typically, if you are paying the fee yourself, you may pay with cash, cashier's check, or money order. If your attorney is submitting your payment on your behalf, your attorney may pay with a credit card or check with a pre-printed address. I need to pay the fee in installments. If you choose this option, sign and attach the Application for Individuals to Pay The Filing Fee in Installments (Official Form 103A). I request that my fee be waived (You may request this option only if you are filing for Chapter 7. By law, a judge may, but is not required to, waive your fee, and may do so only if your income is less than 150% of the official poverty line that applies to your family size and you are unable to pay the fee in installments). If you choose this option, you must fill out the Application to Have the Chapter 7 Filing Fee Waived (Official Form 103B) and file it with your petition. Have you filed for No bankruptcy within the <sub>District</sub> None last 8 years? \_\_\_\_\_ When \_\_\_ ☐ Yes. Case Number MM / DD / YYYY District None \_\_ When \_\_\_ \_\_\_ Case Number \_\_\_ MM / DD / YYYY \_\_\_\_\_ When \_\_\_ \_\_\_\_\_ Case Number \_\_\_ MM / DD / YYYY No 10. Are any bankruptcy cases pending or being filed by a spouse who is Yes. not filing this case with \_\_\_\_\_ When \_\_\_\_\_ Case Number, if known \_\_\_\_\_ you, or by a business MM / DD / YYYY parter, or by affiliate? Relationship to you \_ When \_ Case Number, if known \_\_\_\_ District MM / DD / YYYY 11. Do you rent your ☐ No. Go to line 12 residence? Has your landlord obtained an eviction judgment against you and do you want to stay in your residence? No. Go to line 12. Yes. Fill out Initial Statement About an Eviction Judgment Against You (Form 101A) and file it with

this bankruptcy petition.

Debtor 1 Gregory Stephen Document Capra Page 4 of 58

Case Number (if known)

| 2. Are you a sole proprietor of any full- or part-time business?  A sole proprietorship is a   | ■ No.<br>□ Yes. | Go to Part 4.  Name and location of b  | ousiness        |                     |             |       |            |
|--|-----------------|--|-----------------|---------------------|-------------|-------|------------|
| business you operate as an individual, and is not a separate legal entity such as a corporation, partnerhsip, or LLC.  If you have more than one sole proprietorship, use a separate sheed and attach it to this petition. |                 | Name of business, if any   |                 |                     |             |       |            |
|  |                 | Number Street  |                 |                     |             |       |            |
|  |                 | City   |                 |                     |             | State | Zip Code   |
|  |                 | Check the appropriate  | box to describ  | e your business:    |             |       |            |
|  |                 | ☐ Health Care Busi   | ness (as defin  | ed in 11 U.S.C. §   | 101(27A))   |       |            |
|  |                 | ☐ Single Asset Rea   | l Estate (as de | efined in 11 U.S.C. | § 101(51B)) |       |            |
|  |                 | ☐ Stockbroker (as o  | defined in 11 L | J.S.C. § 101(53A))  |             |       |            |
|  |                 | ☐ Commodity Broke  | er (as defined  | in 11 U.S.C. § 101  | (6))        |       |            |
|  |                 | ☐ None of the abov   | е               |                     |             |       |            |
| For a definition of <i>small</i> business debtor, see 11 U.S.C. § 101(51D).  |                 | am filing under Chapter<br>the Bankruptcy Code.<br>I am filing under Chapter<br>Bankruptcy Code. |                 |                     |             |       |            |
| Part 4: Report if You Own or H   | ave Any Hazard  | ous Property or Any Prop   | erty That Need  | ls Immediate Atter  | tion        |       |            |
| . Do you own or have any   | No.             |  |                 |                     |             |       |            |
| property that poses or is<br>alleged to pose a threat<br>of imminent and   | _               | What is the hazard?  |                 |                     |             |       |            |
| indentifiable hazard to public health or safety?   |                 |  |                 |                     |             |       |            |
| Or do you own any  |                 |  |                 |                     |             |       |            |
| property that needs immediate attention? For example, do you own perishable goods, or livestock  |                 | If immediate attention is  | needed, why i   | s it needed?        |             |       |            |
| that must be fed, or a building that needs urgent repairs?   |                 |  |                 |                     |             |       |            |
|  |                 | Where is the property? _   |                 |                     |             |       |            |
|  |                 |  | Number          | Street              |             |       |            |
|  |                 |  |                 |                     |             |       |            |
|  |                 |  | City            |                     |             | State | e ZIP Code |

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Debtor 1

Gregory

Stephen

Document Capra

Case Number (if known)

Part 5:

Explain Your Efforts to

Tell the court whether you have received a briefing about credit counseling.

> The law requires that you receive a briefing about credit counseling before you file for bankruptcy. You must truthfully check one of the following choices. If you cannot do so, you are not eligible to file.

If you file anyway, the court can dismiss your case, you will lose whatever filing fee you paid, and your creditors can begin collection activities again.

| About Debtor 1:   | About Debtor 2 (Spouse Only in a Joint Case):   |
|---|---|
| You must check one:   | You must check one:   |
| I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.  | I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.  |
| Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.  | Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.  |
| I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.   | ☐ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.   |
| Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.   | Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.   |
| I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.   | I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.   |
| To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.  | To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.  |
| Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy. If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.  Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days. | Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy. If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you fil You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.  Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days. |
| I am not required to receive a briefing about credit counseling because of:   | I am not required to receive a briefing about credit counseling because of:   |
| Incapacity. I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.  | Incapacity. I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.  |
| Disability. My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.  | Disability. My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.  |
| Active duty. I am currently on active military duty in a military combat zone.  | Active duty. I am currently on active military duty in a military combat zone.  |
| If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.   | If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.   |

Debtor 1 Gregory Stephen Document Capra Page 6 of 58

Case Number (if known)

|                                  |            | 16a Are your debts primarily  | consumer debts? Consumer debts are de   | fined in 11 U.S.C. & 101/8\             |  |  |
|----------------------------------|------------|---|---|---|--|--|
| . What kind of de                | ebts do    | 16a. Are your debts primarily consumer debts? Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose." |   |   |  |  |
| you have?                        |            | No. Go to line 16b.   |   |   |  |  |
|                                  |            | Yes. Go to line 17.   |   |   |  |  |
|                                  |            |   | <b>business debts?</b> Business debts are debts stment or through the operation of the busine               |   |  |  |
|                                  |            | No. Go to line 16c.   |   |   |  |  |
|                                  |            | Yes. Go to line 17.   |   |   |  |  |
|                                  |            | 16c. State the type of debts you o  | we that are not consumer debts or business of   | debts.                                  |  |  |
| . Are you filing u               | ınder      | ☐ No. I am not filing under Ch  | anter 7 Go to line 18   |   |  |  |
| Chapter 7?                       |            | <u> </u>  |   |   |  |  |
| Do you estimat                   |            | administrative expense  | er 7. Do you estimate that after any exempt p<br>s are paid that funds will be available to distril         | • •                                     |  |  |
| excluded and<br>administrative   | eynenses   | No.   |   |   |  |  |
| are paid that fu                 | -          | ∐Yes.   |   |   |  |  |
| available for dis                |            |   |   |   |  |  |
|                                  |            | <b>1</b> 4 40   | П 1 000 5 000   | <b>D</b> 25 004 50 000                  |  |  |
| How many cred<br>you estimate th |            | ■ 1-49<br>□ 50-99   | ☐ 1,000-5,000<br>☐ 5,001-10,000   | ☐ 25,001-50,000<br>☐ 50,001-100,000     |  |  |
| owe?                             | iat you    | ☐ 100-199   | 10,001-25,000   | ☐ More than 100,000                     |  |  |
|                                  |            | ☐ 200-999   | <b>2</b> 10,000 20,000  |   |  |  |
| How much do y                    | /ou        | \$0-\$50,000  | \$1,000,001-\$10 million  | □\$500,000,001-\$1 billion              |  |  |
| estimate your a                  |            | \$50,001-\$100,000  | \$10,000,001-\$50 million   | □\$1,000,000,001-\$10 billion           |  |  |
| be worth?                        |            | \$100,001-\$500,000   | □ \$50,000,001-\$100 million  | □\$10,000,000,001-\$50 billion          |  |  |
|                                  |            | □ \$500,001-\$1 million   | \$100,000,001-\$500 million   | ☐More than \$50 billion                 |  |  |
| How much do y                    | /ou        | \$0-\$50,000  | □ \$1,000,001-\$10 million  | □\$500,000,001-\$1 billion              |  |  |
| estimate your l                  | iabilities | \$50,001-\$100,000  | ☐ \$10,000,001-\$50 million   | □\$1,000,000,001-\$10 billion           |  |  |
| to be?                           |            | <b>\$100,001-\$500,000</b>  | \$50,000,001-\$100 million  | \$10,000,000,001-\$50 billion           |  |  |
|                                  |            | ☐ \$500,001-\$1 million   | \$100,000,001-\$500 million   | ☐ More than \$50 billion                |  |  |
| art 7: Sign Belo                 | w          |   |   |   |  |  |
| r you                            |            | I have examined this petition, and correct.   | I declare under penalty of perjury that the info  | rmation provided is true and            |  |  |
|                                  |            |   | ter 7, I am aware that I may proceed, if eligibl<br>nderstand the relief available under each chap          | • |  |  |
|                                  |            | , ,   | did not pay or agree to pay someone who is rd read the notice required by 11 U.S.C. § 342                   | , ,                                     |  |  |
|                                  |            | I request relief in accordance with   | the chapter of title 11, United States Code, sp   | ecified in this petition.               |  |  |
|                                  |            |   | nent, concealing property, or obtaining money<br>n fines up to \$250,000, or imprisonment for u<br>il 3571. |   |  |  |
|                                  |            | /s/ Gregory Stephen C   |   | ture of Debtor 2                        |  |  |
|                                  |            | 04/00/0040  |   |   |  |  |
|                                  |            | Executed on04/29/2016   | Execu   | uted on                                 |  |  |

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Debtor 1 Gregory Stephen Capra Case Number (if known) \_\_\_\_\_

For your attorney, if you are represented by one

if you are not represented by an attorney, you do not need to file this page. I, the attorney for the debtor(s) named in this petition, declare that I have informed the debtor(s) about eligibility to proceed under Chapter 7, 11, 12, or 13 of title 11, United States Code, and have explained the relief available under each chapter for which the person is eligible. I also certify that I have delivered to the debtor(s) the notice required by 11 U.S.C. § 342(b) and, in a case in which § 707(b)(4)(D) applies, certify that I have no knowledge after an inquiry that the information in the schedules filed with the petition is incorrect.

| 🗶 /s/ Salvador Gutierrez         | Date     | Date | e: 04/29/       | 2016                  |
|----------------------------------|----------|------|-----------------|-----------------------|
| Signature of Attorney for Debtor | Bate     | MM / | DD / YYY        | Υ                     |
| Salvador Gutierrez               |          |      |                 |                       |
| Printed name                     |          |      |                 |                       |
| Geraci Law L.L.C.                |          |      |                 |                       |
| Firm name                        |          |      |                 | _                     |
| 55 E. Monroe St., #3400          |          |      |                 |                       |
|                                  |          |      |                 |                       |
| Number Street                    |          |      |                 |                       |
| Number Street                    |          |      |                 | _                     |
| Number Street Chicago            | IL       | 60   | 603             | _                     |
|                                  | IL State |      | 603<br>ZIP Code | _                     |
| Chicago                          | State    | :    | ZIP Code        | _<br>-<br>racilaw.com |
| Chicago                          | State    | :    | ZIP Code        | _<br>_<br>racilaw.com |

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| ill in this info         | ormation to ident    |                                     | OUMITION             |  |
|--------------------------|----------------------|-------------------------------------|----------------------|--|
| Debtor 1                 | Gregory              | Stephen                             | Capra                |  |
|                          | First Name           | Middle Name                         | Last Name            |  |
| Debtor 2                 |                      |                                     |                      |  |
| (Spouse, if filing)      | First Name           | Middle Name                         | Last Name            |  |
| United States E          | Bankruptcy Court for | the : <u>NORTHERN</u> District of _ | ILLINOIS_<br>(State) |  |
| Case Number _ (If known) |                      |                                     | _                    |  |

# Official Form 106Sum

### **Summary of Your Assets and Liabilities and Certain Statistical Information**

12/15

Check if this is an amended filing

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Fill out all of your schedules first; then complete the information on this form. If you are filing amended schedules after you file your original forms, you must fill out a new *Summary* and check the box at the top of this page.

| Part 1:    | Summarize Your Assets  |  |
|------------|--|--|
|            |  | Your assets<br>Value of what you own     |
| 1a. Copy   | y line 63, Total of all property on Schedule A/B   | \$ 0<br>\$ 19,424<br>\$ 19,424           |
| Part 2:    | Summarize Your Liabilities   |  |
|            | e <i>D: Creditors Who Have Claims Secured by Property</i> (Official Form 106D)<br>y the total you listed in Column A, <i>Amount of claim,</i> at the bottom of the last page of Part 1 of <i>Schedule D</i>  | Your liabilities Amount you owe \$14,488 |
| 3а. Сору   | e E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F) y the total claims from Part 1 (priority unsecured claims) from line 6e of Schedule E/F y the total claims from Part 2 (nonpriority unsecured claims) from line 6j of Schedule E/F | \$4,515<br>\$23,517                      |
| Part 3:    | Summarize Your Liabilities   |  |
|            | e <i>I: Your Incom</i> e (Official Form 106I) our combined monthly income from line 12 of <i>Schedule I</i>  | \$2,898.25                               |
| 5. Schedul | e <i>J: Your Expenses</i> (Official Form 106J) our monthly expenses from line 22c of <i>Schedule J</i>   | \$2,003.00                               |

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Case 16-14781 Desc Main Page 9 of 58 Document Gregory Stephen Case Number (if known) \_ First Name Middle Name Last Name **EntriesDescription AssetsAmount LiabilitiesAmount Answer These Questions for Administrative and Statistical Records** 6. Are you filing for bankruptcy under Chapter 7, 11 or 13? No. You have nothing to report on this part of the form. Check this box and submit this form to the court with your other schedules. Yes 7. What kind of debt do you have? Your debts are primarily consumer debts. Consumer debts are those "incurred by an individual primarily for a personal, family, or household purpose." 11 U.S.C. § 101(8). Fill out lines 8-9g for statistical purposes. 28 U.S.C. § 159. Your debts are not primarily consumer debts. You have nothing to report on this part of the form. Check this box and submit this form to the court with your other schedules. 8. From the Statement of Your Current Monthly Income: Copy your total current monthly income from Official \$1,989.00 Form 122A-1 Line 11; OR, Form 122B Line 11; OR, Form 122C-1 Line 14. 9. Copy the following special categories of claims from Part 4, line 6 of Schedule E/F: Total claim From Part 4 of Schedule E/F, copy the following: \$ 0.00 9a. Domestic support obligations (Copy line 6a.) \$ 4,940.00 9b. Taxes and certain other debts you owe the government. (Copy line 6b.)  $_{0.00}$ 9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.) 9d. Student loans. (Copy line 6f.) \$ 0.00 9e. Obligations arising out of a separation agreement or divorce that you did not report as \$ 0.00

\$ 0.00

\$ 4,940.00

priority claims. (Copy line 6g.)

9g. Total. Add lines 9a through 9f.

9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)

|  | Caso 16   | \$ 14791 Doc 1  | Eilad 04/20/16  | Entered 04/29/16 16   | 6:48:13 D   | esc Main  | 1                             |
|--|---|---|---|---|---|---|-------------------------------|
| Fill in this in  | formation to ide  | ntify your case and this fili   |   | 0 of 58   | 51.10.20  | ooo man   | 1                             |
| Debtor 1   | Gregory   | Stephen   | Capra   |   |   |   |                               |
|  | First Name  | Middle Name   | Last Name   |   |   |   |                               |
| Debtor 2<br>(Spouse, if filing)  | First Name  | Middle Name   | Last Name   |   |   |   |                               |
| United States  | Bankruptcy Court for  | or the : <u>NORTHERN</u> Distri   |   |   |   |   |                               |
| Case Number  |   |   | (State)   |   |   | Check if  | f this is an                  |
| (If known)   |   |   |   |   |   | amende  | ed filing                     |
| Official F   | <u>orm 106A</u>   | <u>/B</u>   |   |   |   |   |                               |
| Schedul  | e A/B: Pr   | operty  |   |   |   |   | 12/15                         |
| esponsible for ages, write you on the second of the second | supplying corre ur name and cas  Describe Each Re un or have any le  Describe   | ct information. If more spa<br>e number (if known). Ansv<br>sidence, Building, Land, or C<br>gal or equitable interest in | ice is needed, attach a separa<br>wer every question.<br>Other Real Esate You Own or Ha<br>I any residence, building, land  | l, or similar property?   |   |   |                               |
|  | -   | -   | our entries fro Part 1, includir  | ng any entries for pages  | >   |   | \$0.00                        |
|  | Describe Your Vel   | sialaa  |   |   |   |   | Ψ0.00                         |
| Part 2:  | Describe Four Ver   | ncies   |   |   |   |   |                               |
| No. Yes.  No. Yes.  No. Yes.  No. Yes.  No. Yes.   | Describe  Make:  Model:  Year:  Approximate Milea  Other information:  t, aircraft, motor  Boats, trailers, motor  Describe | homes, ATVs and other re<br>ors, personal watercraft, fishing   | Who has an interest in the Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 on At least one of the debtors Check if this is comminstructions)  creational vehicles, other veh vessels, snowmobiles, motorcycle | ly s and another unity property (see icles, and accessories accessories | Do not deduct secur the amount of any secureditors Who Have Current value of the entire property? | ecured claims on<br>e Claims Secured<br>he Currer       | Schedule D:                   |
|  |   |   | our entries fro Part 2, includir  | ng any entries for pages  |   |   | \$ 8,772.00                   |
|  |   |   |   |   |   |   |                               |
| Part 3:  | Describe Your Per   | sonal and Household Items   |   |   |   |   |                               |
| Do you own o   | r have any legal  | or equitable interest in any  | of the following items?   |   |   | Current va<br>portion yo<br>Do not dedu<br>or exemption | ou own?<br>uct secured claims |
| Examples:  |   | ishings<br>urniture, linens, china, kitchenw  | /are  |   |   |   |                               |
| Yes.   | Describe  | Furniture, linens, small applian  | nces, table & chairs, bedroom set   |   | \$1,000   |   | \$ 1,000.00                   |

Official Form 106A/B Record # 708904 Schedule A/B: Property Page 1 of 6

Case 16-14781 Doc 1 Desc Main Gregory

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| 07. Electro    | onics  |   |  |
|----------------|--|---|--|
|                |  | dios; audio, video, stereo, and digital equipment; computers, printers, scanners; music   |  |
|                | loris, electronic devices<br>lo.                     | s including cell phones, cameras, media players, games  |  |
|                | es. Describe   |   |  |
|                | 2000   | 1 Flat screen TV, computer, and a cell phone \$450  |  |
|                |  |   | \$450.00                                       |
|                | tibles of value                                      |   |  |
|                |  | ines; paintings, prints, or other artwork; books, pictures, or other art objects; collections; other collections, memorabilia, collectibles |  |
|                | lo.  |   |  |
| │              | es. Describe   |   |  |
| _              |  |   | \$0.00   |
|                | ment for sports and                                  |   |  |
|                | oles: Sports, photograp<br>ayaks; carpentry tools; r | hic, exercise, and other hobby equipment; bicycles, pool tables, golf clubs, skis; canoes   |  |
| _              | lo.  | nusical institutients   |  |
| I =            | es. Describe   |   |  |
|                | 2000   |   | \$0.00   |
| 10. Fireari    | ms   |   |  |
| Exam           | oles: Pistols, rifles, shot                          | guns, ammunition, and related equipment   |  |
| <u> </u>       | lo.  |   |  |
| ∐Y             | es. Describe   |   |  |
| 11. Clothe     |  |   | \$0.00   |
|                |  | furs, leather coats, designer wear, shoes, accessories  |  |
|                | lo.  | ,   |  |
|                | es. Describe   |   |  |
| _              |  | Everyday clothes,leather coat, shoes \$250  |  |
|                |  |   | \$ <u>250.0</u> 0                              |
| 12. Jeweli     | -  | continue involve anagoment rings wedding rings heidenm involve watches game   |  |
| gold, s        |  | costume jewelry, engagement rings, wedding rings, heirloom jewelry, watches, gems,  |  |
|                | lo.  |   |  |
| Y              | es. Describe   |   |  |
|                |  | Watch \$75  |  |
| 40 11 5        |  |   | \$75.00  |
|                | irm animals<br>oles: Dogs, cats, birds,              | horses  |  |
|                | lo.  |   |  |
| │              | es. Describe   |   |  |
|                |  |   | \$0.00   |
| 14. Any of     | her personal and h                                   | ousehold items you did not already list, including any health aids you did not list   |  |
| □              | lo.  |   |  |
| Y              | es. Describe   |   |  |
|                |  | Books, CDs, DVDs & Family Photos \$75   | s 75.00  |
| 15 Add th      | o dollar value of all                                | of your entries from Part 3, including any entries for pages you have attached  | \$   |
|                |  | per here>   | \$1,850.00                                     |
| IOI Fai        |  | Jer Here  |  |
| Part 4:        | Describe Your Fire                                   | nancial Assets  |  |
| _              |  |   |  |
| Do you ov      | n or have any legal                                  | or equitable interest in any of the following?  | Current value of the                           |
|                |  |   | portion you own?  Do not deduct secured claims |
|                |  |   | or exemptions                                  |
| 16. Cash       |  |   |  |
|                |  | n your wallet, in your home, in a safe deposit box, and on hand when you file your petition   |  |
|                | lo.  |   |  |
| ∐ <sup>y</sup> | es. Describe   |   |  |
|                |  |   | \$0 <u>.0</u> 0                                |

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Middle Name

Desc Main

| 17. | Deposits o   | f money              |                                 |  |                        |          |          |
|-----|--------------|----------------------|---------------------------------|--|------------------------|----------|----------|
|     | Examples:    | Checking, savings    | , or other financial accounts;  | ertificates of deposit; shares in credit unions, brokerage I | houses,                |          |          |
|     |              | imilar institutions. | If you have multiple accounts   | with the same institution, list each.                        |                        |          |          |
|     | No.          |                      |                                 |  |                        |          |          |
|     | Yes.         | Describe             | Account Type:                   | Institution name:  |                        |          |          |
|     |              |                      | Checking Account                | First Midwest Bank   |                        | \$       | 30.00    |
|     |              |                      |                                 |  |                        | \$       | 30.00    |
| 18. | Bonds, mu    | tual funds, or p     | ublicly traded stocks           |  |                        |          |          |
|     | Examples:    | Bond funds, invest   | ment accounts with brokerag     | firms, money market accounts                                 |                        |          |          |
|     | No.          |                      |                                 |  |                        |          |          |
|     | Yes.         | Describe             | Institution or issuer name      | :  |                        |          |          |
|     |              |                      |                                 |  |                        | \$       | 0.00     |
| 19. | Non-public   | ly traded stock      | and interests in incorpo        | ated and unincorporated businesses, including                | an interest in         |          |          |
|     | No.          |                      |                                 |  |                        |          |          |
|     | Yes.         | Describe             | Name of Entity and Perce        | ent of Ownership:  |                        |          |          |
|     |              | Describe             |                                 |  |                        | \$       | 0.00     |
| 20. | Governme     | nt and corporat      | e bonds and other negot         | able and non-negotiable instruments                          |                        | <b>-</b> |          |
|     |              | =                    | <del>-</del>                    | hecks, promissory notes, and money orders.                   |                        |          |          |
|     | -            |                      |                                 | someone by signing or delivering them.                       |                        |          |          |
|     | No.          |                      |                                 |  |                        |          |          |
|     | Yes.         | Describe             | Issuer name:                    |  |                        |          |          |
|     |              | D00011D0             |                                 |  |                        | \$       | 0.00     |
| 21. | Retirement   | or pension acc       | counts                          |  |                        | ·        |          |
|     |              | =                    |                                 | hrift savings accounts, or other pension or profit-sharing   | plans                  |          |          |
|     | No.          |                      |                                 |  |                        |          |          |
|     | Yes.         | Describe             | Type of account and Inst        | tution name:   |                        |          |          |
|     | 1 cs.        | Describe             | Type of account and mot         |  |                        | \$       | 0.00     |
| 22. | Security de  | eposits and pre      | payments                        |  |                        | <b>-</b> |          |
|     | -            | -                    |                                 | ou may continue service or use from a company                |                        |          |          |
|     |              |                      |                                 | utilities (electric, gas, water), telecommunications         |                        |          |          |
|     | No.          |                      |                                 |  |                        |          |          |
|     | Yes.         | Describe             | Institution name or individ     | ual:   |                        |          |          |
|     |              |                      |                                 |  |                        | \$       | 0.00     |
| 23. | Annuities (  | A contract for a     | a periodic payment of mo        | ney to you, either for life or for a number of year          | urs)                   | ,        |          |
|     | No.          |                      |                                 |  | ,                      |          |          |
|     | Yes.         | Describe             | Issuer name and descrip         | ion:   |                        |          |          |
|     | L res.       | Describe             | issuel flame and descrip        | IOII.  |                        | \$       | 0.00     |
| 24  | Interests in | an education l       | RA in an account in a gr        | alified ABLE program, or under a qualified state             | e tuition program      | Ψ        | <u> </u> |
|     |              |                      | (b), and 529(b)(1).             | anned ADEE program, or under a quanted state                 | , taition program.     |          |          |
|     | No.          | 3(-)(-),             | (-), (-)(-).                    |  |                        |          |          |
|     | Yes.         | Describe             | Institution name and des        | cription. Separately file the records of any interests       | s 11 II S C. 8 521(c): |          |          |
|     | 165.         | Describe             | montation name and des          | inplion. Ocparately life the records of any interest.        | 3.11 G.G.G. § 021(0).  | \$       | 0.00     |
| 25  | Truete ani   | iitahle or future    | interests in property (at       | ner than anything listed in line 1), and rights or p         | nowers                 | Ψ        | <u> </u> |
| 20. | No.          | inable of fatale     | interests in property (or       | ici didii diiyamig nated iii mie 1/, diid righta or į        | powers                 |          |          |
|     | <b>=</b>     |                      |                                 |  |                        |          |          |
|     | Yes.         | Describe             |                                 |  |                        | _        |          |
|     |              |                      |                                 |  |                        | \$       | 0.00     |
| 26. | -            |                      |                                 | other intellectual property                                  |                        |          |          |
|     |              | internet domain na   | arnes, websites, proceeds fror  | royalties and licensing agreements                           |                        |          |          |
|     | No.          |                      |                                 |  |                        |          |          |
|     | Yes.         | Describe             |                                 |  |                        |          |          |
|     |              |                      |                                 |  |                        | \$       | 0.00     |
| 27. |              |                      | other general intangible        |  |                        |          |          |
|     |              | Building permits, e  | exclusive licenses, cooperative | association holdings, liquor licenses, professional licens   | es                     |          |          |
|     | No.          |                      |                                 |  |                        |          |          |
|     | Yes.         | Describe             |                                 |  |                        |          |          |
|     |              |                      |                                 |  |                        | \$       | 0.00     |

Case 16-14781 Stephen Doc 1 Gregory Debtor 1

Desc Main

First Name

Middle Name

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| Мо  | ney or property owed to yo                                       | u?  | Current value of the portion you own? Do not deduct secured claims or exemptions |
|-----|--|---|--|
| 28. | Tax refunds owed to you  |   |  |
|     | No. Yes. Describe  |   |  |
| 29  | Family support   |   | \$0.00   |
| 20. |  | um alimony, spousal support, child support, maintenance, divorce settlement, property settlement  |  |
|     | Yes. Describe  |   | \$   |
| 30. |  | owes you ability insurance payments, disability benefits, sick pay, vacation pay, workers' compensation, id loans you made to someone else        |  |
|     | Yes. Describe  |   | \$   |
| 31. | No.  | ies r life insurance; health savings account (HSA); credit, homeowner's, or renter's insurance Company Name & Beneficiary:                        |  |
|     | Yes. Describe  | Health Insurance \$0 Term Life Insurance  | \$ 0.00  |
| 32. | If you are the beneficiary of a property because someone had No. | at is due you from someone who has died living trust, expect proceeds from a life insurance policy, or are currently entitled to receive as died. | <u> </u>   |
| 33. |  | s, whether or not you have filed a lawsuit or made a demand for payment ment disputes, insurance claims, or rights to sue                         | \$0.00   |
|     | No.  Yes. Describe   |   | \$0.00   |
| 34. | Other contingent and unlied No.                                  | quidated claims of every nature, including counterclaims of the debtor and rights   |  |
|     | Yes. Describe  |   | \$0.00   |
| 35. | Any financial assets you do                                      | id not already list   |  |
|     | Yes. Describe  |   | \$0.00   |
|     |  | of your entries from Part 4, including any entries for pages you have attached  | \$30.00  |
|     | for Part 4. Write that number                                    | er here>  | L 430.00   |
|     |  | iness-Related Property You Own or Have an Interest In. List any real estate in Part 1.  |  |
| 37. | No.  | gal or equitable interest in any business-related property?   |  |
|     | ∐Yes.  |   | Current value of the portion you own? Do not deduct secured claims or exemptions |
| 38. | Accounts receivable or co  | mmissions you already earned  |  |
|     | Yes. Describe  |   | \$0.00   |

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First Name Middle Name

| 39.               | 9. Office equipment, furnishings, and supplies   |                              |
|-------------------|--|------------------------------|
|                   | Examples: Business-related computers, software, modems, printers, copiers, fax machines, rugs, telephones, desks, chairs, electronic devices  No.  |                              |
|                   | Yes. Describe  |                              |
|                   |  | \$0.00                       |
| 40.               | 0. Machinery, fixtures, equipment, supplies you use in business, and tools of your trade   |                              |
|                   | Yes. Describe  |                              |
|                   | Tes. Describe  | \$0.00                       |
| 41.               | 1. Inventory   |                              |
|                   | No.  |                              |
|                   | Yes. Describe  | \$ 0.00                      |
| 42.               | 2. Interests in partnerships or joint ventures   | <u> </u>                     |
|                   | No. Name of Entity and Percent of Ownership:   |                              |
|                   | Yes. Describe  |                              |
| 43                | 3. Customer lists, mailing lists, or other compilations  | \$0.00                       |
|                   | No.  |                              |
|                   | Yes. Describe  |                              |
| ١                 |  | \$ <u>0.0</u> 0              |
| 44.               | 4. Any business-related property you did not already list  No.   |                              |
|                   | Yes. Describe  |                              |
|                   |  | \$0.00                       |
|                   |  |                              |
| 45.               | 5. Add the dollar value of all of your entries from Part 5, including any entries for pages you have attached  for Part 5. Write that number here  | \$ 0.00                      |
|                   | 101 Fait 5. Write that number here   |                              |
|                   | Part 6: Describe Any Farm- and Commercial Fishing-Related Property You Own or Have an Interest In.   |                              |
|                   |  |                              |
| 46                | If you own or have any legal or equitable interest in any farm, or commercial fishing-related property?  |                              |
| 46                | If you own or have an interest in farmland, list it in Part 1.  6. Do you own or have any legal or equitable interest in any farm- or commercial fishing-related property?  No.  |                              |
| 46                | 6. Do you own or have any legal or equitable interest in any farm- or commercial fishing-related property?   |                              |
|                   | 6. Do you own or have any legal or equitable interest in any farm- or commercial fishing-related property?  No.  Yes. Describe   | \$0.00                       |
|                   | 6. Do you own or have any legal or equitable interest in any farm- or commercial fishing-related property?  No.  Yes. Describe  7. Farm animals  | \$ <u>0.0</u> 0              |
|                   | 6. Do you own or have any legal or equitable interest in any farm- or commercial fishing-related property?  No.  Yes. Describe   | \$ <u>0.0</u> 0              |
|                   | 6. Do you own or have any legal or equitable interest in any farm- or commercial fishing-related property?  No.  Yes. Describe  7. Farm animals  Examples: Livestock, poultry, farm-raised fish  | <u> </u>                     |
| 47.               | 6. Do you own or have any legal or equitable interest in any farm- or commercial fishing-related property?  No.  Yes. Describe  7. Farm animals  Examples: Livestock, poultry, farm-raised fish  No.  Yes. Describe  | \$ <u>0.00</u>               |
| 47.               | 6. Do you own or have any legal or equitable interest in any farm- or commercial fishing-related property?  No.  Yes. Describe  7. Farm animals  Examples: Livestock, poultry, farm-raised fish  No.  Yes. Describe  8. Crops—either growing or harvested  | <u> </u>                     |
| 47.               | 6. Do you own or have any legal or equitable interest in any farm- or commercial fishing-related property?  No.  Yes. Describe  7. Farm animals  Examples: Livestock, poultry, farm-raised fish  No.  Yes. Describe  | <u> </u>                     |
| 47.               | 6. Do you own or have any legal or equitable interest in any farm- or commercial fishing-related property?  No.  Yes. Describe  7. Farm animals  Examples: Livestock, poultry, farm-raised fish  No.  Yes. Describe  8. Crops—either growing or harvested  No.  Yes. Describe  | <u> </u>                     |
| 47.               | 6. Do you own or have any legal or equitable interest in any farm- or commercial fishing-related property?  No.  Yes. Describe  7. Farm animals  Examples: Livestock, poultry, farm-raised fish  No.  Yes. Describe  8. Crops—either growing or harvested  No.  Yes. Describe  9. Farm and fishing equipment, implements, machinery, fixtures, and tools of trade  | \$                           |
| 47.               | 6. Do you own or have any legal or equitable interest in any farm- or commercial fishing-related property?  No.  Yes. Describe  7. Farm animals  Examples: Livestock, poultry, farm-raised fish  No.  Yes. Describe  8. Crops—either growing or harvested  No.  Yes. Describe  9. Farm and fishing equipment, implements, machinery, fixtures, and tools of trade  No.   | \$                           |
| 47.               | 6. Do you own or have any legal or equitable interest in any farm- or commercial fishing-related property?  No.  Yes. Describe  7. Farm animals  Examples: Livestock, poultry, farm-raised fish  No.  Yes. Describe  8. Crops—either growing or harvested  No.  Yes. Describe  9. Farm and fishing equipment, implements, machinery, fixtures, and tools of trade  | \$                           |
| 48.               | 6. Do you own or have any legal or equitable interest in any farm- or commercial fishing-related property?  No.  Yes. Describe  7. Farm animals  Examples: Livestock, poultry, farm-raised fish  No.  Yes. Describe  8. Crops—either growing or harvested  No.  Yes. Describe  9. Farm and fishing equipment, implements, machinery, fixtures, and tools of trade  No.   | \$\$<br>\$0.00               |
| 48.               | No.  Yes. Describe  7. Farm animals  Examples: Livestock, poultry, farm-raised fish  No.  Yes. Describe  8. Crops—either growing or harvested  No.  Yes. Describe  9. Farm and fishing equipment, implements, machinery, fixtures, and tools of trade  No.  Yes. Describe  9. Farm and fishing supplies, chemicals, and feed  No.  | \$\$<br>\$0.00               |
| 48.               | 6. Do you own or have any legal or equitable interest in any farm- or commercial fishing-related property?  No.  Yes. Describe  7. Farm animals  Examples: Livestock, poultry, farm-raised fish  No.  Yes. Describe  8. Crops—either growing or harvested  No.  Yes. Describe  9. Farm and fishing equipment, implements, machinery, fixtures, and tools of trade  No.  Yes. Describe  10. Farm and fishing supplies, chemicals, and feed  | \$\$<br>\$\$<br>\$\$         |
| 48.               | No.  Yes. Describe  7. Farm animals  Examples: Livestock, poultry, farm-raised fish  No.  Yes. Describe  8. Crops—either growing or harvested  No.  Yes. Describe  9. Farm and fishing equipment, implements, machinery, fixtures, and tools of trade  No.  Yes. Describe  9. Farm and fishing supplies, chemicals, and feed  No.  | \$\$<br>\$\$                 |
| 48.               | 6. Do you own or have any legal or equitable interest in any farm- or commercial fishing-related property?    No.  | \$\$<br>\$\$<br>\$\$         |
| 48.               | 6. Do you own or have any legal or equitable interest in any farm- or commercial fishing-related property?  No.  Yes. Describe  7. Farm animals  Examples: Livestock, poultry, farm-raised fish  No.  Yes. Describe  8. Crops—either growing or harvested  No.  Yes. Describe  9. Farm and fishing equipment, implements, machinery, fixtures, and tools of trade  No.  Yes. Describe  0. Farm and fishing supplies, chemicals, and feed  No.  Yes. Describe  1. Any farm- and commercial fishing-related property you did not already list          | \$\$<br>\$\$<br>\$\$<br>\$\$ |
| 48.               | No.  | \$\$<br>\$\$<br>\$\$         |
| 48.<br>49.<br>50. | No.  | \$\$<br>\$\$<br>\$\$<br>\$\$ |
| 48.<br>49.<br>50. | 6. Do you own or have any legal or equitable interest in any farm- or commercial fishing-related property?  No. Yes. Describe  7. Farm animals  Examples: Livestock, poultry, farm-raised fish No. Yes. Describe  8. Crops—either growing or harvested No. Yes. Describe  9. Farm and fishing equipment, implements, machinery, fixtures, and tools of trade No. Yes. Describe  0. Farm and fishing supplies, chemicals, and feed No. Yes. Describe  1. Any farm- and commercial fishing-related property you did not already list No. Yes. Describe | \$\$<br>\$\$<br>\$\$<br>\$\$ |

Debtor 1

Gregory Case 16-14781 Stephen

Doc 1

Desc Main

Middle Name

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Last Name

| Describe All Property You Own or Have an Interest in That You Did Not List A   | pove         |              |
|--|--------------|--------------|
| 53. Do you have other property of any kind you did not already list?  Examples: Season tickets, country club membership  No. |              |              |
| Yes. Describe  |              | \$0.00       |
| 54. Add the dollar value of all of your entries from Part 7. Write that number here  | \$0.00       |              |
| Part 8: List the Totals of Each Part of this Form  |              |              |
| 55. Part 1: Total real estate, line 2  |              | \$ 0.00      |
| 56. Part 2: Total vehicles, line 5   | \$ 8,772.00  |              |
| 57. Part 3: Total personal and household items, line 15  | \$ 1,850.00  |              |
| 58. Part 4: Total financial assets, line 36  | \$ 30.00     |              |
| 59. Part 5: Total business-related property, line 45   | \$ 0.00      |              |
| 60. Part 6: Total farm- and fishing-related property, line 52  | \$ 0.00      |              |
| 61. Part 7: Total other property not listed, line 54   | \$ 0.00      |              |
| 62. <b>Total personal property.</b> Add lines 56 through 61  | \$ 10,652.00 | \$ 10,652.00 |
| 63. <b>Total of all property on Schedule A/B.</b> Add line 55 + line 62  |              | \$10,652.00  |

Schedule A/B: Property Page 6 of 6 Official Form 106A/B Record # 708904

| Fill in this in     | nformation to identif   | y your case:                       |                      |
|---------------------|-------------------------|------------------------------------|----------------------|
| Debtor 1            | Gregory                 | Stephen                            | Capra                |
|                     | First Name              | Middle Name                        | Last Name            |
| Debtor 2            |                         |                                    |                      |
| (Spouse, if filing) | First Name              | Middle Name                        | Last Name            |
| United States       | Bankruptcy Court for th | he : <u>NORTHERN</u> District of _ | _ILLINOIS<br>(State) |
| Case Number         | r                       |                                    | (Otato)              |
| (If known)          |                         |                                    |                      |

# Official Form 106C

### Schedule C: The Property You Claim as Exempt

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Using the property you listed on Schedule A/B: Property (Official Form 106A/B) as your source, list the property that you claim as exempt. If more space is needed, fill out and attach to this page as many copies of Part 2: Additional Page as necessary. On the top of any additional pages, write your name and case number (if known).

For each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to state a specific dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up to the amount of any applicable statutory limit. Some exemptions-such as those for health aids, rights to receive certain benefits, and tax-exempt retirement funds-may be unlimited in dollar amount. However, if you claim an exemption of 100% of fair market value under a law that limits the exemption to a particular dollar amount and the value of the property is determined to exceed that amount, your exemption would be limited to the applicable statutory amount.

| Part 1: Identify the Property You Claim as Exempt  |  |                                      |   |                                    |  |  |  |  |  |
|--|--|--------------------------------------|---|------------------------------------|--|--|--|--|--|
| 1. Which set of exemptions are you claiming? Check one only, even if your spouse is filing with you. |  |                                      |   |                                    |  |  |  |  |  |
| You are claiming state and federal nonbankruptcy exemptions . 11 U.S.C. § 522(b)(3)                  |  |                                      |   |                                    |  |  |  |  |  |
| You are claiming federal exemptions. 11 U.S.C. § 522(b)(2)   |  |                                      |   |                                    |  |  |  |  |  |
|  |  |                                      |   |                                    |  |  |  |  |  |
| 2. For any propert   | ty you list on <i>Schedule A/B</i> that yo                       | u claim as exempt, fill in t         | the information below.  |                                    |  |  |  |  |  |
| -  | on of the property and line on that lists this property          | Current value of the portion you own | Amount of the exemption you claim                               | Specific laws that allow exemption |  |  |  |  |  |
|  |  | Copy the value from<br>Schedule A/B  | Check only one box for each exemption                           |                                    |  |  |  |  |  |
| Brief<br>description:  | 2015 Chevrolet Sonic with over 11,000 miles                      | \$_8,772                             | \$ _2,400   | 735 ILCS 5/12-1001(c) - \$2,400.00 |  |  |  |  |  |
| Line from Schedule A/B:  | 03   |                                      | 100% of fair market value, up to any applicable statutory limit |                                    |  |  |  |  |  |
| Brief<br>description:  | Furniture, linens, small appliances, table & chairs, bedroom set | \$_1,000                             | <b></b> \$  | 735 ILCS 5/12-1001(b) - \$1,000.00 |  |  |  |  |  |
| Line from Schedule A/B:  | <u>06</u>  |                                      | 100% of fair market value, up to any applicable statutory limit |                                    |  |  |  |  |  |
| Brief<br>description:  | 1 Flat screen TV, computer, and a cell phone                     | \$ <u>450</u>                        | <b></b> \$  | 735 ILCS 5/12-1001(b) - \$450.00   |  |  |  |  |  |
| Line from Schedule A/B:  | <u>07</u>  |                                      | 100% of fair market value, up to any applicable statutory limit |                                    |  |  |  |  |  |
| Brief<br>description:  | Everyday clothes,leather coat, shoes                             | \$ <u>250</u>                        | <b></b> \$  | 735 ILCS 5/12-1001(b) - \$250.00   |  |  |  |  |  |
| Line from Schedule A/B:  | <u>11</u>  |                                      | 100% of fair market value, up to any applicable statutory limit |                                    |  |  |  |  |  |
|  |  |                                      |   |                                    |  |  |  |  |  |
| Official Form 1060   | Record # 708904  | Schedule C: T                        | he Property You Claim as Exempt                                 | Page 1 of 2                        |  |  |  |  |  |

Page 17 of 58 Number (if known) Document Debtor 1 Gregory Stephen Middle Name Last Name First Name

| Part 2:           | Additi  | onal Page                        |                 |                                      |   |                              |             |
|-------------------|---|----------------------------------|-----------------|--------------------------------------|---|------------------------------|-------------|
|                   | Brief description of the property and line on Schedule A/B that lists this property |                                  | ie on           | Current value of the portion you own | Amount of the exemption you claim                               | Specific laws that allow e   | exemption   |
|                   |   |                                  |                 | Copy the value from Schedule A/B     | Check only one box for each exemptio                            |                              |             |
| Brief<br>descript | ion:  | Watch                            |                 | \$ <u>75</u>                         | <b>\$</b>   | 735 ILCS 5/12-1001(b) - \$75 | 5.00        |
| Line from         |   | 12                               |                 |                                      | 100% of fair market value, up to any applicable statutory limit |                              |             |
| Brief<br>descript | ion:  | Books, CDs, DVDs & Far<br>Photos | nily            | \$ <u>75</u>                         | <b>\$</b>   | 735 ILCS 5/12-1001(a) - \$75 | 5.00        |
| Line from         |   | 14                               |                 |                                      | 100% of fair market value, up to any applicable statutory limit |                              |             |
| 3. Are you        | claiming  | g a homestead exempt             | ion of more th  | nan \$155,675?                       |   |                              |             |
|                   |   |                                  |                 |                                      | n or after the date of adjustment .)                            |                              |             |
| _                 | to aujus  | unient on 4/01/10 and e          | very 5 years a  | inter that for cases filed of        | in or after the date of adjustifient.)                          |                              |             |
| No.               |   |                                  |                 |                                      |   |                              |             |
|                   |   | acquire the property co          | overed by the e | exemption within 1,215 d             | ays before you filed this case?                                 |                              |             |
|                   | No  |                                  |                 |                                      |   |                              |             |
|                   | Yes.  |                                  |                 |                                      |   |                              |             |
|                   |   |                                  |                 |                                      |   |                              |             |
|                   |   |                                  |                 |                                      |   |                              |             |
|                   |   |                                  |                 |                                      |   |                              |             |
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|                   |   |                                  |                 |                                      |   |                              |             |
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|                   |   |                                  |                 |                                      |   |                              |             |
|                   |   |                                  |                 |                                      |   |                              |             |
|                   |   |                                  |                 |                                      |   |                              |             |
|                   |   |                                  |                 |                                      |   |                              |             |
|                   |   |                                  |                 |                                      |   |                              |             |
|                   |   |                                  |                 |                                      |   |                              |             |
|                   |   |                                  |                 |                                      |   |                              |             |
|                   |   |                                  |                 |                                      |   |                              |             |
| Official Fo       | rm 106C   | Record #                         | 708904          | Schedule C: T                        | he Property You Claim as Exempt                                 |                              | Page 2 of 2 |

|   | nformation to ident  | ity your case:   |  | 8 of 58   |   |  |                               |
|---|--|--|--|---|---|--|-------------------------------|
| Debtor 1  | Gregory  | Stephe   | n Capra  |   |   |  |                               |
| 202101  | First Name   | Middle Name  | Last Name  |   |   |  |                               |
| Debtor 2  |  |  |  | _   |   |  |                               |
| (Spouse, if filing)   | First Name   | Middle Name  | Last Name  |   |   |  |                               |
| United State  | s Bankruptcy Court for   | the : <u>NORTHERN</u>  | District of <u>ILLINOIS</u>  |   |   |  |                               |
| Case Numbe  | er   |  | (State)  |   |   | Check if thi                                       | s is an                       |
| (If known)  | **   |  |  |   |   | amended fi   | ling                          |
| Official F  | orm 106D   |  |  |   |   |  |                               |
|   |  |  | . 01-: 0 1 b-  | . D   |   |  | 12                            |
|   |  |  | e Claims Secured by ried people are filing together, by  |   |   |  | 12                            |
| dditional pag   | es, write your name  | and case number  |  | e charles, and attach it to a   | iis form. On the top of a                             | ,  |                               |
| ☐ No. C   | heck this box and su   | ubmit this form to the   | e court with your other schedules  | . You have nothing else to re   | eport on this form.                                   |  |                               |
|   |  |  | <u>-</u>   |   | ·   |  |                               |
| Yes F   | ill in all of the inform   | ation below  |  |   |   |  |                               |
| Yes. F  | ill in all of the inform   | ation below.   |  |   |   |  |                               |
| Yes. F  | ill in all of the inform   |  |  |   |   |  |                               |
| Part 1:   | List All Secured Cla   | ims  | on one secured claim, list the cre   | ditar congrately  | Column A  | Column A   |                               |
| Part 1:   | List All Secured Cla   | ims<br>creditor has more that  | an one secured claim, list the cre<br>articular claim, list the other credi  | •   | Amount of claim                                       | Value of collateral                                | Unsecure                      |
| Part 1:  2. List all so for each (  | List All Secured Clarecured claims. If a claim. If more than c   | ims<br>creditor has more that<br>one creditor has a pa   |  | tors in Part 2.   |   |  |                               |
| Part 1:  2. List all so for each o As much  | List All Secured Clarecured claims. If a claim. If more than c   | ereditor has more the<br>one creditor has a p<br>claims in alphabetic                          | articular claim, list the other credi  | tors in Part 2.<br>s name.  | Amount of claim Do not deduct the                     | Value of collateral that supports this             |                               |
| Part 1:  2. List all so for each o As much  | ecured claims. If a claim. If more than cas possible, list the ent BANK AND TRU  | ereditor has more the<br>one creditor has a p<br>claims in alphabetic                          | articular claim, list the other credi<br>al order according to the creditor  | tors in Part 2. s name. cures the claim:  | Amount of claim Do not deduct the value of collateral | Value of collateral<br>that supports this<br>claim | Unsecure<br>portion<br>If any |
| 2. List all se for each of As much  Cresco Creditor's 5401 J  | ecured claims. If a claim. If more than claim. If more than claims possible, list the ent BANK AND TRUES Name efferson Hwy Ste D   | ereditor has more the<br>one creditor has a p<br>claims in alphabetic                          | articular claim, list the other credi<br>al order according to the creditor<br>Describe the property that se   | tors in Part 2. s name. cures the claim:  | Amount of claim Do not deduct the value of collateral | Value of collateral<br>that supports this<br>claim | Unsecure<br>portion<br>If any |
| 2. List all so for each o As much  Cresco   | ecured claims. If a claim. If more than cas possible, list the ent BANK AND TRU  | ereditor has more the<br>one creditor has a p<br>claims in alphabetic                          | articular claim, list the other credital order according to the creditor  Describe the property that se  2015 Chevrolet Sonic with o   | tors in Part 2. s name. cures the claim: ver 11,000 miles   | Amount of claim Do not deduct the value of collateral | Value of collateral<br>that supports this<br>claim | Unsecure<br>portion<br>If any |
| 2. List all se for each of As much  Cresco Creditor's 5401 J  | ecured claims. If a claim. If more than claim. If more than claims possible, list the ent BANK AND TRUES Name efferson Hwy Ste D   | ereditor has more the<br>one creditor has a p<br>claims in alphabetic                          | articular claim, list the other credital order according to the creditor  Describe the property that se  2015 Chevrolet Sonic with o   | tors in Part 2. s name. cures the claim: ver 11,000 miles   | Amount of claim Do not deduct the value of collateral | Value of collateral<br>that supports this<br>claim | Unsecure<br>portion<br>If any |
| 2. List all se for each of As much  Cresco Creditor's 5401 J  | ecured claims. If a claim. If more than claim. If more than claims possible, list the ent BANK AND TRUES Name efferson Hwy Ste D   | ereditor has more the<br>one creditor has a p<br>claims in alphabetic                          | articular claim, list the other credital order according to the creditor  Describe the property that se  2015 Chevrolet Sonic with o  As of the date you file, the cla   | tors in Part 2. s name. cures the claim: ver 11,000 miles   | Amount of claim Do not deduct the value of collateral | Value of collateral<br>that supports this<br>claim | Unsecure<br>portion<br>If any |
| 2. List all se for each of As much  Cresco Creditor's 5401 J Number   | ecured claims. If a claim. If more than claim. If more than claims possible, list the ent BANK AND TRUES Name efferson Hwy Ste D   | creditor has more the one creditor has a pactains in alphabetic S                              | articular claim, list the other credital order according to the creditor  Describe the property that se  2015 Chevrolet Sonic with o   | tors in Part 2. s name. cures the claim: ver 11,000 miles   | Amount of claim Do not deduct the value of collateral | Value of collateral<br>that supports this<br>claim | Unsecure<br>portion<br>If any |
| 2. List all se for each of As much  2.1 Cresce Creditor's 5401 J Number  Haraha City                                | ecured claims. If a claim. If more than claim. If more than claims possible, list the ent BANK AND TRUES Name efferson Hwy Ste D   | creditor has more that one creditor has a proclaims in alphabetic S                            | articular claim, list the other credital order according to the creditor  Describe the property that se  2015 Chevrolet Sonic with o  As of the date you file, the cla  Contingent  Unliquidated   | tors in Part 2. s name. cures the claim: ver 11,000 miles aim is: Check all that apply.   | Amount of claim Do not deduct the value of collateral | Value of collateral<br>that supports this<br>claim | Unsecure<br>portion<br>If any |
| 2. List all se for each (As much 2.1 Cresce Creditor's 5401 J Number Haraha City                                    | ecured claims. If a claim. If more than claim. If more than claims as possible, list the lent BANK AND TRUES Name efferson Hwy Ste D   | creditor has more that one creditor has a proclaims in alphabetic S                            | articular claim, list the other credital order according to the creditor  Describe the property that se  2015 Chevrolet Sonic with o  As of the date you file, the cla  Contingent  Unliquidated  Disputed   | tors in Part 2. s name. cures the claim: ver 11,000 miles aim is: Check all that apply.   | Amount of claim Do not deduct the value of collateral | Value of collateral<br>that supports this<br>claim | Unsecure<br>portion<br>If any |
| 2. List all se for each (As much 2.1 Cresce Creditor's 5401 J Number Haraha City                                    | ecured claims. If a claim. If more than claim. If more than claims as possible, list the ent BANK AND TRUes Name lefferson Hwy Ste Defferson Hwy Ste Defferson Hwy Check on an an as the debt? Check on a 1 only   | creditor has more that one creditor has a proclaims in alphabetic S                            | articular claim, list the other credital order according to the creditor  Describe the property that se  2015 Chevrolet Sonic with o  As of the date you file, the cla  Contingent Unliquidated Disputed  Nature of Lien. Check all that   | tors in Part 2. s name. cures the claim: ver 11,000 miles aim is: Check all that apply.   | Amount of claim Do not deduct the value of collateral | Value of collateral<br>that supports this<br>claim | Unsecure<br>portion<br>If any |
| 2. List all so for each of As much  2.1 Cresco Creditor's 5401 J Number  Haraha City  Who owe                       | ecured claims. If a claim. If more than claim. If more than claims as possible, list the ent BANK AND TRUes Name lefferson Hwy Ste Defferson Hwy Ste Defferson Hwy Check on an an as the debt? Check on a 1 only   | creditor has more that one creditor has a proclaims in alphabetic S                            | articular claim, list the other credital order according to the creditor  Describe the property that se  2015 Chevrolet Sonic with o  As of the date you file, the cla  Contingent Unliquidated Disputed  Nature of Lien. Check all that a   | tors in Part 2. s name. cures the claim: ver 11,000 miles aim is: Check all that apply. apply. ch as mortgage or secured                      | Amount of claim Do not deduct the value of collateral | Value of collateral<br>that supports this<br>claim | Unsecure<br>portion<br>If any |
| 2. List all so for each of As much  2.1 Cresco  Creditor's 5401 J  Number  Haraha  City  Who owe                    | ecured claims. If a claim. If more than claim. If more than claims as possible, list the ent BANK AND TRUes Name lefferson Hwy Ste Defreson Hw | ereditor has more the one creditor has a proclaims in alphabetic S  LA 70123 State Zip Code    | articular claim, list the other credital order according to the creditor  Describe the property that see  2015 Chevrolet Sonic with o  As of the date you file, the cla  Contingent Unliquidated Disputed  Nature of Lien. Check all that a greement you made (su car loan)                | tors in Part 2. s name. cures the claim: ver 11,000 miles aim is: Check all that apply. apply. ch as mortgage or secured in, mechanic's lien) | Amount of claim Do not deduct the value of collateral | Value of collateral<br>that supports this<br>claim | Unsecure<br>portion<br>If any |
| 2. List all so for each of As much  2.1 Cresco Creditor's 5401 J Number  Haraha City  Who owe Debtoo Debtoo At leas | ecured claims. If a colaim. If more than colaim. If more than colaims as possible, list the elect BANK AND TRUes Name lefferson Hwy Ste Dostreet  Street  an  sthe debt? Check on a 1 only a 2 only and Debtor 2 o | creditor has more the one creditor has a proclaims in alphabetic S  LA 70123 State Zip Code e. | articular claim, list the other credital order according to the creditor  Describe the property that see  2015 Chevrolet Sonic with o  As of the date you file, the cla  Contingent  Unliquidated  Disputed  Nature of Lien. Check all that a car loan)  Statutory lien (such as tax lies) | tors in Part 2. s name. cures the claim: ver 11,000 miles aim is: Check all that apply. apply. ch as mortgage or secured in, mechanic's lien) | Amount of claim Do not deduct the value of collateral | Value of collateral<br>that supports this<br>claim | Unsecure portion              |

|                                  |  | Caso 16 1479   | 21 Doc 1  | Filad 04/20/16   | Entered 04/2                                       | 9/16 16:48:13   | Desc Main         |                       |
|----------------------------------|--|--|---|--|--|---|-------------------|-----------------------|
| Fill                             | in this inf  | formation to identify your   | case:   |  | 9 of 58  |   |                   |                       |
| De                               | btor 1   | Gregory  | Stephen   | Capra  |  |   |                   |                       |
| 20                               |  | First Name   | Middle Name   | Last Name  |  |   |                   |                       |
| De                               | btor 2   |  |   |  |  |   |                   |                       |
| (Spo                             | use, if filing)  | First Name   | Middle Name   | Last Name  |  |   |                   |                       |
| Un                               | ited States I  | Bankruptcy Court for the : <u>N</u>  | ORTHERN_ District   | of <u>ILLINOIS</u>   |  |   |                   |                       |
| Ca                               | se Number  |  |   | (State)  |  |   | Check if          | f this is an          |
|                                  | known)   |  |   |  |  |   | amende            | ed filing             |
| Offi                             | cial Fo  | orm 106E/F   |   |  |  |   |                   |                       |
|                                  |  |  | /ha Haya II   | nsecured Claims  |  |   |                   | 12/15                 |
| /B: P<br>redito<br>eede<br>op of | roperty (Cors with pad, copy the any additional transfer of the transfer of transfer of the transfer of transf | Official Form 106A/B) and of a control of the contr | on Schedule G: Ex<br>at are listed in Sch<br>number the entrie<br>me and case numb<br>isecured Claims | . ,  | expired Leases (Official<br>ve Claims Secured by I | l Form 106G). Do not inc<br>Property. If more space i | lude any<br>s     |                       |
|                                  | No. Go   | to Part 2.   |   |  |  |   |                   |                       |
|                                  | Yes.   |  |   |  |  |   |                   |                       |
| ur                               | nsecured o   | claims, fill out the Continua  | tion Page of Part 1.  | in alphabetical order accordii If more than one creditor ho ions for this form in the instru | lds a particular claim, lis                        | •   | •                 | Nonpriority<br>amount |
| 2.1                              |  | ority Debt   | Las   | t 4 digits of account number   |  | \$ <u>4,515.00</u>                                    | <u>\$4,515.00</u> | \$ 0.00               |
|                                  | PO Box   |  | Wh  | en was the debt incurred?  | 2012   |   |                   |                       |
|                                  | Number   | Street   |   |  |  |   |                   |                       |
|                                  |  |  | As  | of the date you file, the claim  | is: Check all that apply.                          |   |                   |                       |
|                                  | Philadel   | phia PA 1  |   | Contingent   |  |   |                   |                       |
|                                  | City   |  | Zin Code  | Unliquidated   |  |   |                   |                       |
| ١                                | _  | the debt? Check one.   | Ц   | Disputed   |  |   |                   |                       |
| l                                | Debtor 1   | •  | T   | o of PRIORITY was somed also   | ·  |   |                   |                       |
|                                  | Debtor 2   | and Debtor 2 only  |   | oe of PRIORITY unsecured cla<br>Domestic support obligations                                 | ıım:   |   |                   |                       |
| i                                | =  | one of the debtors and another   | =   | Taxes and certain other debts yo   | ou owe the government                              |   |                   |                       |
| i                                | =  | if this claim relates to a   | _   | ,  | · ·  |   |                   |                       |
| '                                | commu  | nity debt  |   | Claims for death or personal inju  | ry while you were                                  |   |                   |                       |
|                                  |  | n subject to offest?   | _   | intoxicated  |  |   |                   |                       |
|                                  | No<br>Yes  |  | Ц   | Other. Specify   | <del></del>  |   |                   |                       |
| Par                              |  | ist All of Your NONPRIORIT   | Y Unsecured Claim   | s  |  |   |                   |                       |
|                                  |  | litors have nonpriority un   | secured claims an   | ainst you?   |  |   |                   |                       |
| J. D.                            | -  | · · · · ·  | _   | is form to the court with your   | other schedules                                    |   |                   |                       |
|                                  |  | a have nothing to report in  | uns part. Submit un   | is form to the court with your   | other schedules.                                   |   |                   |                       |
| 4. li                            | Yes.   | our nonpriority unsecured  | claims in the alph  | abetical order of the credito  | or who holds each clair                            | n. If a creditor has more t                           | han one           |                       |
| no<br>in                         | onpriority u   | unsecured claim, list the cre  | editor separately for<br>editor holds a partic  | r each claim. For each claim<br>ular claim, list the other credi                             | listed, identify what type                         | e of claim it is. Do not list                         | claims already    |                       |
| Cl                               | unno IIII UL   | at the Continuation Fage of  | Tultz.  |  |  |   |                   | Total claim           |

| Debtor 1 | Gregory Stephen                                    | Document Page 20 of 58 Case Number (if known)                     |                  |
|----------|--|---|------------------|
|          | First Name Middle Name                             | Last Name   |                  |
| 4.1      | Cavalry Portfolio Services                         | Last 4 digits of account number                                   | \$ <u>640.00</u> |
|          | Creditor's Name 500 Summit Lake Dr Ste 400         | When was the debt incurred?                                       |                  |
|          | Number Street                                      | when was the dept incurred?                                       |                  |
|          | Number Street                                      |   |                  |
|          |  | As of the date you file, the claim is: Check all that apply.      |                  |
|          | Valhalla NY 10595                                  | Contingent  |                  |
|          | City State Zip Code                                | Unliquidated  |                  |
| l v      | ho owes the debt? Check one.                       | Disputed  |                  |
|          | Debtor 1 only                                      |   |                  |
| [        | Debtor 2 only                                      | Type of NONPRIORITY unsecured claim:                              |                  |
|          | Debtor 1 and Debtor 2 only                         | Student loans   |                  |
| [        | At least one of the debtors and another            | Obligations arising out of a separation agreement or divorce      |                  |
|          | Check if this claim relates to a                   | that you did not report as priority claims                        |                  |
| .        | community debt                                     | Debts to pension or profit-sharing plans, and other similar debts |                  |
| ls       | the claim subject to offest?                       | _   |                  |
|          | No   | Other. Specify Collecting for Creditor                            |                  |
| 4.0      | Yes<br>Comcast                                     | Last 4 digits of account number                                   | <b>\$</b> 330.00 |
| 4.2      | Creditor's Name                                    | Last 4 digits of account number                                   | <u> </u>         |
|          | 5330 E. 65th St.                                   | When was the debt incurred? 2009                                  |                  |
|          | Number Street                                      |   |                  |
|          |  | As of the date you file, the claim is: Check all that apply.      |                  |
|          |  | Contingent  |                  |
|          | Indianapolis IN 46220                              | Unliquidated  |                  |
| ١,,,     | City State Zip Code //ho owes the debt? Check one. | Disputed  |                  |
| "        | Debtor 1 only                                      |   |                  |
| 1 7      | Debtor 2 only                                      | Time of NONDRIORITY unacquired claims                             |                  |
| -        | Debtor 1 and Debtor 2 only                         | Type of NONPRIORITY unsecured claim:  Student loans               |                  |
| 1 1      | At least one of the debtors and another            | Obligations arising out of a separation agreement or divorce      |                  |
|          |  | that you did not report as priority claims                        |                  |
| -        | Check if this claim relates to a community debt    | Debts to pension or profit-sharing plans, and other similar debts |                  |
| Is       | the claim subject to offest?                       |   |                  |
|          | No   | Other. Specify Utility Bills/Cellular Service                     |                  |
|          | Yes  |   |                  |
| 4.3      | Commonwealth Edison                                | Last 4 digits of account number 3041                              | \$ <u>680.00</u> |
|          | Creditor's Name                                    | When was the debt incurred? 2013                                  |                  |
|          | 3 Lincoln Center 4th Floor                         | When was the debt incurred?                                       |                  |
|          | Number Street                                      |   |                  |
|          |  | As of the date you file, the claim is: Check all that apply.      |                  |
|          | Oakbrook Terrace IL 60181                          | Contingent  |                  |
|          | City State Zip Code                                | Unliquidated  |                  |
| W        | ho owes the debt? Check one.                       | Disputed  |                  |
|          | Debtor 1 only                                      |   |                  |
| [        | Debtor 2 only                                      | Type of NONPRIORITY unsecured claim:                              |                  |
|          | Debtor 1 and Debtor 2 only                         | Student loans   |                  |
| [        | At least one of the debtors and another            | Obligations arising out of a separation agreement or divorce      |                  |
|          | Check if this claim relates to a                   | that you did not report as priority claims                        |                  |
|          | community debt                                     | Debts to pension or profit-sharing plans, and other similar debts |                  |
| IS       | the claim subject to offest?                       | Out of the Hillsty Billsty Collular Sonica                        |                  |
|          | Yes  | Other. SpecifyUtility Bills/Cellular Service                      |                  |

Case 16-14781 Doc 1 Filed 04/29/16 Entered 04/29/16 16:48:13 Desc Main Page 21 of 58 Document Stephen Gregory Debtor 1 Your NONPRIORITY Unsecured Claims - Continuation Page After listing any entries on this page, number them beginning with 4.4, followed by 4.5, and so forth. **Total Claim** Credit One Bank \$ 1,585.00 Last 4 digits of account number \_ Creditor's Name PO Box 60500 When was the debt incurred? Number As of the date you file, the claim is: Check all that apply. Contingent City Of Industry CA 91716 Unliquidated City State Zip Code Disputed Who owes the debt? Check one. Debtor 1 only Debtor 2 only Type of NONPRIORITY unsecured claim: Debtor 1 and Debtor 2 only Student loans Obligations arising out of a separation agreement or divorce At least one of the debtors and another that you did not report as priority claims Check if this claim relates to a community debt Debts to pension or profit-sharing plans, and other similar debts Is the claim subject to offest? No Other. Specify Credit Card or Credit Use Yes Enhanced Recovery Corp. **\$** 110.00 Last 4 digits of account number 4.5 Creditor's Name 2011 8014 Bayberry Road When was the debt incurred? Number Street As of the date you file, the claim is: Check all that apply. Contingent Jacksonville 32256 FL Unliquidated City State Zip Code Disputed Who owes the debt? Check one.

Doc 1 Filed 04/29/16 Entered 04/29/16 16:48:13 Desc Main Case 16-14781 Page 22 of 58 Case Number (if known) **Document** Gregory Stephen Debtor 1 Your NONPRIORITY Unsecured Claims - Continuation Page After listing any entries on this page, number them beginning with 4.4, followed by 4.5, and so forth. **Total Claim** 4.7 Ford Motor Credit Company \$ 4,170.78 Last 4 digits of account number

| 7.7   |   |                    |
|---|---|--------------------|
| Creditor's Name PO Box 537901                   | When was the debt incurred? 2009                                  |                    |
|   | Wileli was the dept incurred?                                     |                    |
| Number Street                                   |   |                    |
|   | As of the date you file, the claim is: Check all that apply.      |                    |
|   | Contingent  |                    |
| Livonia MI 4                                    | 48153 Unliquidated  |                    |
|   | Zip Code  |                    |
| Who owes the debt? Check one.                   | Disputed  |                    |
| Debtor 1 only                                   |   |                    |
| Debtor 2 only                                   | Type of NONPRIORITY unsecured claim:                              |                    |
| Debtor 1 and Debtor 2 only                      | Student loans   |                    |
| At least one of the debtors and anothe          | er Obligations arising out of a separation agreement or divorce   |                    |
|   | that you did not report as priority claims                        |                    |
| Check if this claim relates to a community debt |   |                    |
| Is the claim subject to offest?                 | Debts to pension or profit-sharing plans, and other similar debts |                    |
| No  | <b>—</b>  |                    |
| _ =   | Other. Specify Deficiency, Repo"d/Surr"d Auto                     |                    |
| Yes HSBC  |   | <b>A 804 00</b>    |
| 4.0   | Last 4 digits of account number                                   | \$ <u>894.00</u>   |
| Creditor's Name                                 | When was the debt incurred? 2011                                  |                    |
| PO Box 5222                                     | When was the debt incurred? 2011                                  |                    |
| Number Street                                   |   |                    |
|   | As of the date you file, the claim is: Check all that apply.      |                    |
|   | Contingent  |                    |
| Carol Stream IL 6                               | 60197   |                    |
| City State                                      | Zip Code Unliquidated   |                    |
| Who owes the debt? Check one.                   | Disputed  |                    |
| Debtor 1 only                                   |   |                    |
| Debtor 2 only                                   | Type of NONPRIORITY unsecured claim:                              |                    |
| Debtor 1 and Debtor 2 only                      | Student loans   |                    |
|   |   |                    |
| At least one of the debtors and anothe          | <del>-</del>  |                    |
| Check if this claim relates to a                | that you did not report as priority claims                        |                    |
| community debt                                  | Debts to pension or profit-sharing plans, and other similar debts |                    |
| Is the claim subject to offest?                 | _   |                    |
| No  | Other. Specify Credit Card or Credit Use                          |                    |
| Yes   |   |                    |
| 4.9 IDES  | Last 4 digits of account number                                   | \$ <u>7,400.00</u> |
| Creditor's Name                                 |   |                    |
| 33 S. State Street                              | When was the debt incurred?                                       |                    |
| Number Street                                   |   |                    |
| 8th Floor                                       | As of the date you file, the claim is: Check all that apply.      |                    |
|   | Contingent  |                    |
| Chicago IL 6                                    | 60603   |                    |
|   | Zin Code Unilquidated   |                    |
| Who owes the debt? Check one.                   | Disputed  |                    |
| Debtor 1 only                                   |   |                    |
| Debtor 2 only                                   | Type of NONPRIORITY unsecured claim:                              |                    |
| Debtor 1 and Debtor 2 only                      | Student loans   |                    |
| <b> </b>  |   |                    |
| At least one of the debtors and anothe          | _   |                    |
| Check if this claim relates to a                | that you did not report as priority claims                        |                    |
| community debt                                  | Debts to pension or profit-sharing plans, and other similar debts |                    |
| Is the claim subject to offest?                 |   |                    |
| No  | Other. Specify  |                    |
| Voc   | <del>_</del>  |                    |

Filed 04/29/16 Entered 04/29/16 16:48:13 Desc Main Case 16-14781 Doc 1 Page 23 of 58 Case Number (if known) **Document** Gregory Stephen Debtor 1 Your NONPRIORITY Unsecured Claims - Continuation Page After listing any entries on this page, number them beginning with 4.4, followed by 4.5, and so forth. **Total Claim** 

| 4.10     | illinois Department of Revenue                     | Last 4 digits of account number  | \$ 425.00        |
|----------|--|--|------------------|
|          | Creditor's Name                                    |  |                  |
|          | PO Box 64338                                       | When was the debt incurred? 2011                                       |                  |
|          | Number Street                                      |  |                  |
|          |  |  |                  |
|          |  | As of the date you file, the claim is: Check all that apply.           |                  |
|          |  | Contingent   |                  |
|          | Chicago IL 60664-0338                              | Unliquidated   |                  |
|          | City State Zip Code                                |  |                  |
| ١ ١      | Who owes the debt? Check one.                      | Disputed   |                  |
|          | Debtor 1 only                                      |  |                  |
| l i      | Debtor 2 only                                      | Type of NONPRIORITY unsecured claim:                                   |                  |
|          | <b>=</b>   | <b>–</b>   |                  |
| <u> </u> | Debtor 1 and Debtor 2 only                         | Student loans  |                  |
| [        | At least one of the debtors and another            | Obligations arising out of a separation agreement or divorce           |                  |
| l i      | Check if this claim relates to a                   | that you did not report as priority claims                             |                  |
| L        | community debt                                     | Debts to pension or profit-sharing plans, and other similar debts      |                  |
|          | s the claim subject to offest?                     | beste to periodic or profit charming plants, and outloi climital debte |                  |
| l i      | No   | Town Follows Older and and   |                  |
|          |  | Other. Specify Taxes - Federal, State or Local                         |                  |
|          | Yes  |  | + 200 00         |
| 4.11     | Jefferson Capital Systems LLC                      | Last 4 digits of account number  | \$ <u>298.00</u> |
|          | Creditor's Name                                    |  |                  |
|          | PO Box 7999  | When was the debt incurred?  |                  |
|          | Number Street                                      |  |                  |
|          |  |  |                  |
|          |  | As of the date you file, the claim is: Check all that apply.           |                  |
|          |  | Contingent   |                  |
|          | Saint Cloud MN 56302                               | Unliquidated   |                  |
|          | City State Zip Code                                |  |                  |
| <u>\</u> | Who owes the debt? Check one.                      | Disputed   |                  |
|          | Debtor 1 only                                      |  |                  |
| [        | Debtor 2 only                                      | Type of NONPRIORITY unsecured claim:                                   |                  |
| l i      | =  | Student loans  |                  |
|          | Debtor 1 and Debtor 2 only                         |  |                  |
| L        | At least one of the debtors and another            | Obligations arising out of a separation agreement or divorce           |                  |
| [        | Check if this claim relates to a                   | that you did not report as priority claims                             |                  |
| "        | community debt                                     | Debts to pension or profit-sharing plans, and other similar debts      |                  |
| 1        | s the claim subject to offest?                     |  |                  |
|          | No   | Other. Specify Credit Extended to Debtor(s)                            |                  |
| Ī        | Yes  | Offici. Openity  |                  |
| 4.40     | Jefferson Capital Systems LLC                      | Last 4 digits of account number  | <b>\$</b> 510.00 |
| 4.12     |  | Last 4 digits of account number  | Ψ <u>σ.σ.σσ</u>  |
|          | Creditor's Name PO Box 7999                        | When was the debt incurred?  |                  |
|          |  | when was the debt incurred?  |                  |
|          | Number Street                                      |  |                  |
|          |  | As of the date you file, the claim is: Check all that apply.           |                  |
|          |  |  |                  |
|          | Saint Cloud MN 56302                               | Contingent   |                  |
|          |  | Unliquidated   |                  |
| ١ ،      | City State Zip Code  Who owes the debt? Check one. | Disputed   |                  |
|          |  | _  |                  |
|          | Debtor 1 only                                      |  |                  |
| L        | Debtor 2 only                                      | Type of NONPRIORITY unsecured claim:                                   |                  |
| [        | Debtor 1 and Debtor 2 only                         | Student loans  |                  |
| į į      | At least one of the debtors and another            | Obligations arising out of a separation agreement or divorce           |                  |
|          |  | that you did not report as priority claims                             |                  |
| L        | Check if this claim relates to a                   |  |                  |
| ١.       | community debt                                     | Debts to pension or profit-sharing plans, and other similar debts      |                  |
|          | s the claim subject to offest?                     | _  |                  |
|          | No   | Other. SpecifyCredit Extended to Debtor(s)                             |                  |
|          | Yes  |  |                  |

| Debtor 1   | Gregory   |             |     | Filed 04/29/16<br>Document   | Entered 04/29/16 16:48:13<br>Page 24 of 58<br>Case Number (if known) | Desc Main |  |  |
|--|---|-------------|-----|------------------------------|--|-----------|--|--|
|  | First Name  | Middle Name |     | Last Name                    | , ,  |           |  |  |
| Part 2   | Your NONPRIORITY Unsecured Claims - Continuation Page |             |     |                              |  |           |  |  |
| After listing any entries on this page, number them beginning with 4.4, followed by 4.5, and so forth. |   |             |     |                              |  |           |  |  |
| / 13 L   | .VNV Fun  | ding        | Las | t 4 digits of account number | r  |           |  |  |

| After lis                             | sting any entries on this page, number them be   | eginning with 4.4, followed by 4.5, and so forth.  | Total Claim        |  |  |  |  |
|---------------------------------------|--|--|--------------------|--|--|--|--|
| 4.13                                  | LVNV Funding                                     | Last 4 digits of account number  | \$ <u>1,627.00</u> |  |  |  |  |
|                                       | Creditor's Name                                  | When was the debt incurred? 2009   |                    |  |  |  |  |
|                                       | PO Box 10497                                     | When was the debt incurred?  |                    |  |  |  |  |
|                                       | Number Street                                    |  |                    |  |  |  |  |
|                                       |  | As of the date you file, the claim is: Check all that apply.   |                    |  |  |  |  |
|                                       | Greenville SC 29603                              | Contingent   |                    |  |  |  |  |
|                                       | City State Zip Code                              | Unliquidated   |                    |  |  |  |  |
| w                                     | /ho owes the debt? Check one.                    | Disputed   |                    |  |  |  |  |
|                                       | Debtor 1 only                                    |  |                    |  |  |  |  |
| [                                     | Debtor 2 only                                    | Type of NONPRIORITY unsecured claim:   |                    |  |  |  |  |
|                                       | Debtor 1 and Debtor 2 only                       | Student loans  |                    |  |  |  |  |
|                                       | At least one of the debtors and another          | Obligations arising out of a separation agreement or divorce   |                    |  |  |  |  |
| ΙГ                                    | Check if this claim relates to a                 | that you did not report as priority claims   |                    |  |  |  |  |
| -                                     | community debt                                   | Debts to pension or profit-sharing plans, and other similar debts  |                    |  |  |  |  |
| Is                                    | s the claim subject to offest?                   |  |                    |  |  |  |  |
|                                       | No   | Other. Specify Credit Card or Credit Use   |                    |  |  |  |  |
|                                       | Yes LVNV Funding LLC                             | Land Addition of a country of the co | <b>\$</b> 1,382.00 |  |  |  |  |
| 4.14                                  | Creditor's Name                                  | Last 4 digits of account number  | \$_1,002.00        |  |  |  |  |
|                                       | PO Box 10587                                     | When was the debt incurred?  |                    |  |  |  |  |
|                                       | Number Street                                    |  |                    |  |  |  |  |
|                                       |  | As of the date year file the algins in Charle all that such  |                    |  |  |  |  |
|                                       |  | As of the date you file, the claim is: Check all that apply.   |                    |  |  |  |  |
|                                       | Greenville SC 29603                              | Contingent   |                    |  |  |  |  |
|                                       | City State Zip Code                              | Unliquidated   |                    |  |  |  |  |
| <u> </u>                              | /ho owes the debt? Check one.                    | Disputed   |                    |  |  |  |  |
|                                       | Debtor 1 only                                    |  |                    |  |  |  |  |
| <u> </u>                              | Debtor 2 only                                    | Type of NONPRIORITY unsecured claim:   |                    |  |  |  |  |
| [                                     | Debtor 1 and Debtor 2 only                       | Student loans  |                    |  |  |  |  |
| [                                     | At least one of the debtors and another          | Obligations arising out of a separation agreement or divorce   |                    |  |  |  |  |
|                                       | Check if this claim relates to a                 | that you did not report as priority claims   |                    |  |  |  |  |
| l .                                   | community debt                                   | Debts to pension or profit-sharing plans, and other similar debts  |                    |  |  |  |  |
| IS                                    | s the claim subject to offest?                   |  |                    |  |  |  |  |
|                                       | No<br>Yes  | Other. Specify Credit Card or Credit Use   |                    |  |  |  |  |
| 4.15                                  | Premier Bank                                     | Last 4 digits of account number  | <b>\$</b> 440.00   |  |  |  |  |
| 4.13                                  | Creditor's Name                                  |  |                    |  |  |  |  |
|                                       | PO Box 2208                                      | When was the debt incurred?  |                    |  |  |  |  |
|                                       | Number Street                                    |  |                    |  |  |  |  |
|                                       |  | As of the date you file, the claim is: Check all that apply.   |                    |  |  |  |  |
|                                       |  | Contingent   |                    |  |  |  |  |
|                                       | Vacaville CA 95696                               | Unliquidated   |                    |  |  |  |  |
| ١.,                                   | City State Zip Code                              | Disputed   |                    |  |  |  |  |
| \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ | /ho owes the debt? Check one.                    |  |                    |  |  |  |  |
|                                       | Debtor 1 only                                    |  |                    |  |  |  |  |
|                                       | Debtor 2 only                                    | Type of NONPRIORITY unsecured claim:   |                    |  |  |  |  |
|                                       | Debtor 1 and Debtor 2 only                       | Student loans  |                    |  |  |  |  |
| <u> </u>                              | At least one of the debtors and another          | Obligations arising out of a separation agreement or divorce   |                    |  |  |  |  |
| L                                     | Check if this claim relates to a                 | that you did not report as priority claims   |                    |  |  |  |  |
| le                                    | community debt<br>s the claim subject to offest? | Debts to pension or profit-sharing plans, and other similar debts  |                    |  |  |  |  |
|                                       | No   | Other. Specify Credit Card or Credit Use   |                    |  |  |  |  |
|                                       | Yes  | Office: Opecally   |                    |  |  |  |  |
|                                       |  |  |                    |  |  |  |  |

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| 4.16 | Premier Bank                                       | Last 4 digits of account number  | \$ <u>489.00</u>   |
|------|--|--|--------------------|
|      | Creditor's Name                                    |  |                    |
|      | PO Box 2208  | When was the debt incurred?  |                    |
|      | Number Street                                      |  |                    |
|      |  | As a fall or defended to the first feet of the first of t |                    |
|      |  | As of the date you file, the claim is: Check all that apply.   |                    |
|      | Vecesille CA 05606                                 | Contingent   |                    |
|      | Vacaville CA 95696                                 | Unliquidated   |                    |
|      | City State Zip Code  Who owes the debt? Check one. | Disputed   |                    |
|      |  |  |                    |
|      | Debtor 1 only                                      |  |                    |
|      | Debtor 2 only                                      | Type of NONPRIORITY unsecured claim:   |                    |
|      | Debtor 1 and Debtor 2 only                         | Student loans  |                    |
|      | At least one of the debtors and another            | Obligations arising out of a separation agreement or divorce   |                    |
|      | Check if this claim relates to a                   | that you did not report as priority claims   |                    |
|      | community debt                                     | Debts to pension or profit-sharing plans, and other similar debts  |                    |
|      | Is the claim subject to offest?                    |  |                    |
|      | No   | Other. Specify Credit Card or Credit Use   |                    |
|      | <b>=</b>   | Other. SpecifyCredit Card or Credit Ose  |                    |
|      | Yes<br>Quantum3 Group                              | Look & divide of account mumbers   | <b>\$</b> 1,036.00 |
| 4.17 |  | Last 4 digits of account number  | a 1,030.00         |
|      | Creditor's Name                                    | When you the debt to some 10   |                    |
|      | PO Box 788   | When was the debt incurred?  |                    |
|      | Number Street                                      |  |                    |
|      |  | As of the date you file, the claim is: Check all that apply.   |                    |
|      |  |  |                    |
|      | Kirkland WA 98083                                  | ☐ Contingent   |                    |
|      | City State Zip Code                                | Unliquidated   |                    |
| '    | Who owes the debt? Check one.                      | Disputed   |                    |
|      | Debtor 1 only                                      |  |                    |
|      | Debtor 2 only                                      | Turns of NONDRIGHTY unpopulated claims   |                    |
|      |  | Type of NONPRIORITY unsecured claim:   |                    |
|      | Debtor 1 and Debtor 2 only                         | Student loans  |                    |
|      | At least one of the debtors and another            | Obligations arising out of a separation agreement or divorce   |                    |
|      | Check if this claim relates to a                   | that you did not report as priority claims   |                    |
|      | community debt                                     | Debts to pension or profit-sharing plans, and other similar debts  |                    |
|      | Is the claim subject to offest?                    |  |                    |
|      | No   | Other. Specify Credit Extended to Debtor(s)  |                    |
|      | Yes  |  |                    |
| 4.18 | Total Card, Inc.                                   | Last 4 digits of account number  | \$ <u>600.00</u>   |
| 1.10 | Creditor's Name                                    | • ———  |                    |
|      | 5109 S. Broadband Lane                             | When was the debt incurred?  |                    |
|      | Number Street                                      | <del></del>  |                    |
|      | Number Street                                      |  |                    |
|      |  | As of the date you file, the claim is: Check all that apply.   |                    |
|      |  | Contingent   |                    |
|      | Sioux Falls SD 57108                               | Unliquidated   |                    |
| Ι.   | City State Zip Code                                | Disputed   |                    |
|      | Who owes the debt? Check one.                      |  |                    |
|      | Debtor 1 only                                      |  |                    |
|      | Debtor 2 only                                      | Type of NONPRIORITY unsecured claim:   |                    |
|      | Debtor 1 and Debtor 2 only                         | Student loans  |                    |
|      | At least one of the debtors and another            | Obligations arising out of a separation agreement or divorce   |                    |
|      |  | that you did not report as priority claims   |                    |
|      | Check if this claim relates to a community debt    |  |                    |
|      | Is the claim subject to offest?                    | Debts to pension or profit-sharing plans, and other similar debts  |                    |
|      | No   | Collecting for Creditor  |                    |
|      | =  | Other. Specify Collecting for Creditor   |                    |
| 1    | Yes  |  |                    |

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Debtor 1

Gregory

List Others to Be Notified for a Debt That You Already Listed 5. Use this page only if you have others to be notified about your bankruptcy, for a debt that you already listed in Parts 1 or 2. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the original creditor in Parts 1 or 2, then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Parts 1 or 2, list the additional creditors here. If you do not have additional persons to be notified for any debts in Parts 1 or 2, do not fill out or submit this page. Dish Network On which entry in Part 1 or Part 2 list the original creditor? Line \_\_5 \_\_ of (Check one): Part 1: Creditors with Priority Unsecured Claims Dept. 0063 Part 2: Creditors with Nonpriority Unsecured Claims Number Street IL 60055-006 Palatine Last 4 digits of account number \_\_\_\_ \_\_\_ State Zip Code City Midland Funding, LLC On which entry in Part 1 or Part 2 list the original creditor? Name 8875 Aero Drive, # 200 Line 6 of (Check one): Part 1: Creditors with Priority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured Claims Street Number San Diego CA 92123 Last 4 digits of account number \_\_\_\_\_ State Zip Code Blatt, Hasenmiller, Leibsker On which entry in Part 1 or Part 2 list the original creditor? Line 6 of (Check one): Part 1: Creditors with Priority Unsecured Claims 10 S. LaSalle St. Ste 2200 Part 2: Creditors with Nonpriority Unsecured Claims Number Street IL 60603 Chicago Last 4 digits of account number \_\_\_\_ \_\_\_ State Zip Code City Blitt and Gaines, PC On which entry in Part 1 or Part 2 list the original creditor? Name 661 Glenn Ave. Part 1: Creditors with Priority Unsecured Claims Line 7 of (Check one): Part 2: Creditors with Nonpriority Unsecured Claims Number Wheeling II 60090 Last 4 digits of account number \_\_\_\_ \_\_\_\_ State Zip Code City Clerk, First Mun Div On which entry in Part 1 or Part 2 list the original creditor? Part 1: Creditors with Priority Unsecured Claims Line 7 of (Check one): 50 W. Washington St., Rm. 1001 Part 2: Creditors with Nonpriority Unsecured Claims Street Number 60602 Chicago IL Last 4 digits of account number \_\_\_\_ \_\_\_ City State Zip Code LHR Inc. On which entry in Part 1 or Part 2 list the original creditor? Part 1: Creditors with Priority Unsecured Claims Line 8 of (Check one): 56 Main St. Part 2: Creditors with Nonpriority Unsecured Claims Number Street

NY 14075

State Zip Code

Hamburg

City

Last 4 digits of account number \_\_\_\_ \_\_\_

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| .01 1                          |             |                             |                                       | tamber (# Known)                                    |
|--------------------------------|-------------|-----------------------------|---------------------------------------|---|
| First Name                     | Middle Name | Last Name                   |                                       |   |
| Tribute/First Bank of Delaware |             | _                           | On which entry in Part 1 or Part 2 li | st the original creditor?                           |
| Name<br>PO Box 105555          |             |                             | Line 11 of (Check one):               | Part 1: Creditors with Priority Unsecured Claims    |
| Number Street                  |             | _                           |                                       | Part 2: Creditors with Nonpriority Unsecured Claims |
| Atlanta                        | GA          | 30348                       | Last 4 digits of account number       |   |
| City                           | State Zip ( | Code                        |                                       |   |
| Salute                         |             | _                           | On which entry in Part 1 or Part 2 li | st the original creditor?                           |
| Name<br>PO Box 790183          |             |                             | Line 12 of (Check one):               | Part 1: Creditors with Priority Unsecured Claims    |
| Number Street                  |             | _                           |                                       | Part 2: Creditors with Nonpriority Unsecured Claims |
| Saint Louis                    | MO          | -<br>63179                  | Last 4 digits of account number       |   |
| City                           | State Zip   | Code                        |                                       |   |
| Resurgent Capital Services     |             | _                           | On which entry in Part 1 or Part 2 li | st the original creditor?                           |
| Name<br>PO Box 10587           |             |                             | Line 14 of (Check one):               | Part 1: Creditors with Priority Unsecured Claims    |
| Number Street                  |             | -                           |                                       | Part 2: Creditors with Nonpriority Unsecured Claims |
| Greenville                     | SC          | -<br>29603-058 <sup>°</sup> | Last 4 digits of account number       |   |
| City                           | State Zip ( | _<br>Code                   | • • • • • • • • •                     | <del></del>   |

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Gregory Debtor 1

Stephen

**D**gcument

23,516.78

|                          | counts of certain types of unsecured claims. This information is fo<br>counts for each type of unsecured claim. | or statistical re | eporting purposes only. 28 U.S.C. § |
|--------------------------|---|-------------------|-------------------------------------|
|                          |   |                   | Total claim                         |
| otal claims<br>om Part 1 | 6a. Domestic support obligations  | 6a.               | \$0.00                              |
|                          | 6b. Taxes and Certain other debts you owe the government  | 6b.               | \$4,515.00                          |
|                          | 6c. Claims for death or personal injury while you were intoxicated  | 6c.               | \$0.00                              |
|                          | 6d. <b>Other.</b> Add all other priority unsecured claims. Write that amount here.                              | 6d.               | \$0.00                              |
|                          | 6e. <b>Total.</b> Add lines 6a through 6d.  | 6e.               | \$4,515.00                          |
|                          |   |                   | Total claim                         |
| otal claims<br>om Part 2 | 6f. Student loans   | 6f.               | \$0.00                              |
|                          | 6g. Obligations arising out of a separation agreement or divorce that you did not report as priority claims     | 6g.               | \$0.00                              |
|                          | 6h. Debts to pension or profit-sharing plans, and other similar debts   | 6h.               | \$                                  |
|                          | 6i. <b>Other.</b> Add all other nonpriority unsecured claims. Write that amount here.                           | 6i.               | \$16,116.78                         |

6j. Total. Add lines 6f through 6i.

|                 |   | Caso 16  |  | ilod 04/20/16  |   | ed 04/29/16 16:48:13   | 3 Desc Main        |      |
|-----------------|---|--|--|--|---|--|--------------------|------|
| FI              | ii in this ini  | formation to ident   | tiry your case:  |  |   | 9 of 58  |                    |      |
| De              | ebtor 1   | Gregory  | Stephen  | Capra  | _   |  |                    |      |
| De              | ebtor 2   | First Name   | Middle Name  | Last Name  |   |  |                    |      |
| (S <sub>l</sub> | pouse, if filing)   | First Name   | Middle Name  | Last Name  |   |  |                    |      |
| Uı              | nited States  | Bankruptcy Court for   | the : <u>NORTHERN</u> District of <u>IL</u>  |  |   |  |                    |      |
|                 | ase Number  |  |  | (State)  |   |  | Check if this is a | an   |
|                 | f known)  | 1000   |  |  |   |  | amended filing     |      |
|                 |   | orm 106G   | ory Contracts and L  |  |   |  |                    | 12/1 |
| nforradditi     | mation. If mitonal pages  Do you hav  No. Cho  Yes. Fill  ist separat | nore space is needs, write your name e any executory content of the information and some ely each person content of the information ely each person content of the information of the in | ded, copy the additional page, to and case number (if known). contracts or unexpired leases? ubmit this form to the court with ynation below even if the contracts or company with whom you have | rour other schedules. Your other schedules. Your eleases are listed in | entries, and a  You have note  Schedule A.  e. Then state | y responsible for supplying correctatach it to this page. On the top of the t | of any  3) or (for |      |
| u               | nexpired le   | ases.  | nom you have the contract or le  |  |   | State what the contract or lo  |                    |      |
| 2.1             |   |  |  |  |   |  |                    |      |
|                 | Name  |  |  |  | _   |  |                    |      |
|                 | Number  | Street   |  |  | _   |  |                    |      |
|                 | City  |  | State Zip C  | ode  | _   |  |                    |      |
| 2.2             |   |  |  |  |   |  |                    |      |
|                 | Name  |  |  |  | _   |  |                    |      |
|                 | Number  | Street   |  |  | _   |  |                    |      |
|                 | City  |  | State Zip C  | ode  | _   |  |                    |      |
| 2.3             |   |  |  |  |   |  |                    |      |
|                 | Name  |  |  |  | _   |  |                    |      |
|                 | Number  | Street   |  |  | _   |  |                    |      |
|                 | City  |  | State Zip C  | nde  | _   |  |                    |      |
|                 | ,   |  |  |  |   |  |                    |      |
| 2.4             |   |  |  |  | _   |  |                    |      |
|                 | Name  |  |  |  |   |  |                    |      |
|                 | Number  | Street   |  |  |   |  |                    |      |
|                 | City  |  | State Zip C  | ode  | _   |  |                    |      |
| 2.5             |   |  |  |  | _   |  |                    |      |
|                 | Name  |  |  |  |   |  |                    |      |
|                 | Number  | Street   |  |  |   |  |                    |      |

State Zip Code

City

Official Form 106G

| Fill in this information to identify your case: |                        |                                    |                 |  |
|---|------------------------|------------------------------------|-----------------|--|
| Debtor 1  | Gregory                | Stephen                            | Capra           |  |
|   | First Name             | Middle Name                        | Last Name       |  |
| Debtor 2  | -                      |                                    |                 |  |
| (Spouse, if filing)                             | First Name             | Middle Name                        | Last Name       |  |
| United States                                   | Bankruptcy Court for t | he : <u>NORTHERN</u> District of _ | <u>ILLINOIS</u> |  |
| Case Number                                     | r                      |                                    | (State)         |  |
| (If known)                                      |                        |                                    |                 |  |

# Official Form 106H

Schedule H: Your Codebtors 12/15

Codebtors are people or entities who are also liable for any debts you may have. Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the Additional Page, fill it out, and number the entries in the boxes on the left. Attach the Additional Page to this page. On the top of any Additional Pages, write your name and case number (if known). Answer every question.

| any Additional Pages, write your name and case number (if known). Answer every question. |  |  |                               |                     |  |  |  |  |  |
|--|--|--|-------------------------------|---------------------|--|--|--|--|--|
| 1. <b>D</b>  | 1. Do you have any codebtors? (If you are filing a joint case, do not list either spouse as a codebtor.) |  |                               |                     |  |  |  |  |  |
|  | No.  |  |                               |                     |  |  |  |  |  |
|  | Yes  |  |                               |                     |  |  |  |  |  |
|  | =  | s, have you lived in a commur<br>aho, Lousiiana, Nevada, New M           |                               |                     | roperty states and territories include<br>Visconsin.)                            |  |  |  |  |
|  | No. Go to line 3.  |  |                               |                     |  |  |  |  |  |
|  | Yes. Did your sp   | ouse, former spouse, or legal ed   | uivalent live with you at the | time?               |  |  |  |  |  |
|  | _  | n community state or territory die                                       | d you live?                   | Fill in the n       | ame and current address of that person.  |  |  |  |  |
|  | Name of your spo   | use, former spouse or legal equivalent                                   |                               |                     |  |  |  |  |  |
|  | Number St  | reet   |                               |                     |  |  |  |  |  |
|  | City   |  | State                         | Zip Code            |  |  |  |  |  |
| 3 In   | -  | f vour codebtors. Do not inclu   |                               | •                   | is filing with you. List the person  |  |  |  |  |
|  |  | Form 106D), Schedule E/F (Off<br>edule G to fill out Column 2.<br>debtor | icial Form 106E/F), or Sche   | dule G (Official Fo | Column 2: The creditor to whom you owe the debt  Check all schedules that apply: |  |  |  |  |
| 3.1  |  |  |                               |                     | Schedule D, line   |  |  |  |  |
|  | Name   |  |                               | _                   | Schedule E/F, line   |  |  |  |  |
|  | Number Stre  | et   |                               |                     | Schedule G, line   |  |  |  |  |
|  | City   | S  | tate Z                        | Zip Code            |  |  |  |  |  |
| 3.2  |  |  |                               | _                   | Schedule D, line   |  |  |  |  |
|  | Name   |  |                               | _                   | Schedule E/F, line   |  |  |  |  |
|  | Number Stre  | et   |                               | _                   | Schedule G, line   |  |  |  |  |
|  | City   | S  | tate Z                        | Zip Code            | _  |  |  |  |  |
| 3.3  |  |  |                               | _                   | Schedule D, line   |  |  |  |  |
|  | Name   |  |                               | _                   | Schedule E/F, line   |  |  |  |  |
|  | Number Stre  | et   |                               |                     | Schedule G, line   |  |  |  |  |
|  | City   | S  | tate Z                        | Zip Code            |  |  |  |  |  |

Official Form 106H Record # 708904 Schedule H: Your Codebtors Page 1 of 1

|                          |                      |                                  | Document           | Page 31 | , 01 58  |
|--------------------------|----------------------|----------------------------------|--------------------|---------|--|
| Fill in this ir          | nformation to ident  | ify your case:                   |                    |         |  |
| Debtor 1                 | Gregory First Name   | Stephen  Middle Name             | Capra<br>Last Name |         |  |
| Debtor 2                 |                      |                                  |                    |         |  |
| (Spouse, if filing)      | First Name           | Middle Name                      | Last Name          |         |  |
| United States            | Bankruptcy Court for | the : <u>NORTHERN DISTRICT O</u> | F ILLINOIS         |         |  |
| Case Numbe<br>(If known) | r                    |                                  | _                  |         | Check if this is:  An amended filing   |
|                          |                      |                                  |                    |         | A supplement showing post-petition chapter 13 income as of the following date: |
| 0.65                     | 4001                 |                                  |                    |         |  |
| Official F               | orm 106I             |                                  |                    |         | MM / DD / YYYY   |

### **Schedule I: Your Income**

12/15

Be as complete and accurate as possible. If two married people are filing together (Debtor 1 and Debtor 2), both are equally responsible for supplying correct information. If you are married and not filing jointly, and your spouse is living with you, include information about your spouse. If you are separated and your spouse is not filing with you, do not include information about your spouse. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

| Pa | Tt 1: Describe Employment  |                                  |                           |              |                                   |
|----|--|----------------------------------|---------------------------|--------------|-----------------------------------|
| 1. | Fill in your employment information  |                                  | Debtor 1                  |              | Debtor 2 or non-filing spouse     |
|    | If you have more than one job, attach a separate page with information about additional employers.   | Employment status                | X Employed Not employed   |              | Employed  Not employed            |
|    | Include part-time, seasonal, or self-employed work.  | Occupation                       | Shuttle Driver            |              |                                   |
|    | Occupation may Include student or homemaker, if it applies.  | Employers name                   | Phillips Chevrolet        | :            |                                   |
|    |  | Employers address                | Lansing, IL 60438         |              | 3                                 |
|    |  | How long employed there?         | 2 years                   |              |                                   |
| Pa | rt 2: Give Details About Monthl  | y Income                         |                           |              |                                   |
|    | Estimate monthly income as of the spouse unless you are separated. If you or your non-filing spouse har lines below. If you need more space                              | ve more than one employer, combi | ine the information for a |              |                                   |
|    |  |                                  |                           | For Debtor 1 | For Debtor 2 or non-filing spouse |
| 2. | <ol> <li>List monthly gross wages, salary and commissions (before all payroll<br/>deductions). If not paid monthly, calculate what the monthly wage would be.</li> </ol> |                                  |                           | \$1,989.00   | \$0.00                            |
| 3. | Estimate and list monthly overti   | me pay.                          |                           | \$0.00       | \$0.00                            |
| 4. | Calculate gross income. Add line   | e 2 + line 3.                    |                           | \$1,989.00   | \$0.00                            |

 Official Form 106I
 Record # 708904
 Schedule I: Your Income
 Page 1 of 2

Document Stephen Gregory Debtor 1 Case Number (if known) First Name Last Name

|             |                    |   |                                  | For Debtor 1             | For Debtor 2 or non-filing spouse |                       |
|-------------|--------------------|---|----------------------------------|--------------------------|-----------------------------------|-----------------------|
|             | Copy               | y line 4 here   | 4.                               | \$1,989.00               | \$0.00                            |                       |
| 5. <b>L</b> | ist all            | payroll deductions:   |                                  |                          |                                   |                       |
|             | 5a. <b>T</b>       | Tax, Medicare, and Social Security deductions   | 5a.                              | \$314.08                 | \$0.00                            |                       |
|             | 5b. <b>N</b>       | Mandatory contributions for retirement plans  | 5b.                              | \$0.00                   | \$0.00                            |                       |
|             | 5c. <b>V</b>       | oluntary contributions for retirement plans   | 5c                               | \$0.00                   | \$0.00                            |                       |
|             | 5d. <b>F</b>       | Required repayments of retirement fund loans  | 5d.                              | \$0.00                   | \$0.00                            |                       |
|             | 5e. <b>I</b>       | nsurance  | 5e.                              | \$359.67                 | \$0.00                            |                       |
|             | 5f. <b>C</b>       | Domestic support obligations  | 5f.                              | \$0.00                   | \$0.00                            |                       |
|             | 5g. <b>L</b>       | Jnion dues  | 5g.                              | \$0.00                   | \$0.00                            |                       |
|             | 5h. <b>C</b>       | Other deductions. Specify:  | 5h.                              | \$0.00                   | \$0.00                            |                       |
| 6. <b>A</b> | dd the             | payroll deductions. Add lines 5a + 5b + 5c + 5d + 5e +5f + 5g +5h.  | 6.                               | \$673.75                 | \$0.00                            |                       |
| 7. <b>C</b> | alcula             | te total monthly take-home pay. Subtract line 6 from line 4.  | 7.                               | \$1,315.25               | \$0.00                            |                       |
| 8. <b>L</b> | ist all            | other income regularly received:  |                                  |                          |                                   |                       |
|             | 8a.                | Net income from rental property and from operating a business,  |                                  |                          |                                   |                       |
|             |                    | profession, or farm   |                                  |                          |                                   |                       |
|             |                    | Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total   |                                  |                          |                                   |                       |
|             |                    | monthly net income.   | 8a.                              | \$0.00                   | \$0.00                            |                       |
|             | 8b.                | Interest and dividends  | 8b.                              | \$0.00                   | \$0.00                            |                       |
|             | 8c.                | Family support payments that you, a non-filing spouse, or a   | 8c.                              | \$ 0.00                  | \$ 0.00                           |                       |
|             |                    | dependent regularly receive   |                                  |                          |                                   |                       |
|             |                    | Include alimony, spousal support, child support, maintenance, divorce   |                                  |                          |                                   |                       |
|             |                    | settlement, and property settlement.  |                                  |                          |                                   |                       |
|             | 8d.                | Unemployment compensation   | 8d.                              | \$0.00                   | \$0.00                            |                       |
|             | 8e.                | Social Security   | 8e.<br>—                         | \$1,583.00               | \$0.00                            |                       |
|             | 8f.                | Other government assistance that you regularly receive  | 8f.                              | \$0.00                   | \$0.00                            |                       |
|             |                    | Include cash assistance and the value (if known) of any non-cash  |                                  |                          |                                   |                       |
|             |                    | assistance that you receive, such as food stamps (benefits under the  |                                  |                          |                                   |                       |
|             |                    | Supplemental Nutrition Assistance Program) or housing subsidies.  |                                  |                          |                                   |                       |
|             | 8g.                | Specify: Pension or retirement income   | 8g.                              | \$0.00                   | \$0.00                            |                       |
|             | 8h.                |   | 8h.                              | \$0.00                   | \$0.00                            |                       |
| 9.          |                    | all other income. Add lines 8a + 8b + 8c + 8d + 8e + 8f +8g + 8h.   | 9.                               |                          |                                   |                       |
| Э.          | Auu                | an other moonie. Add lines on 1 ob 1 oc 1 od 1 oc 1 ol 1 og 1 oli.  | 9.                               | \$1,583.00               | \$0.00                            |                       |
| 10.         | Calc               | ulate monthly income. Add line 7 + line 9.  | 10.                              | \$2,898.25 +             | \$0.00                            | \$2,898.25            |
|             | Add                | the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.  | _                                | , , ,                    | 7333                              | <del>+=,000.20</del>  |
| 11.         | Incluother<br>Do n | e all other regular contributions to the expenses that you list in Schedular de contributions from an unmarried partner, members of your household, your friends or relatives.  In the contribution of the expenses that you list in Schedular de contributions from an unmarried partner, members of your household, your friends or relatives.  In the contributions from an unmarried partner, members of your household, your friends or relatives. | our dependen<br>not available to | p pay expenses listed in | Schedule J.                       | 11. \$0.00            |
| 12.         | Add                | the amount in the last column of line 10 to the amount in line 11. The re-  | sult is the com                  | bined monthly income.    |                                   |                       |
|             |                    | e that amount on the Summary of Schedules and Statistical Summary of Co   |                                  | •                        | applies                           | 12. <b>\$2,898.25</b> |
| 13.         | X I                | ou expect an increase or decrease within the year after you file this form<br>No.<br>Yes. Explain:  | 1?                               |                          |                                   |                       |

| F    | II in this in                 | formation to identify y                     | our case:                                       |                             |   |  |                                 |
|------|-------------------------------|---|---|-----------------------------|---|--|---------------------------------|
| D    | ebtor 1                       | Gregory                                     | Stephen   | Capra                       | Check if t  | this is:                                       |                                 |
|      |                               | First Name                                  | Middle Name                                     | Last Name                   |   | amended filing                                 |                                 |
|      | ebtor 2<br>Spouse, if filing) | First Name                                  | Middle Name                                     | Last Name                   |   | ipplement showing po<br>me as of the following | st-petition chapter 13<br>date: |
| U    | Inited States                 | Bankruptcy Court for the :                  | NORTHERN DISTRICT OF                            | F ILLINOIS                  |   |  |                                 |
|      | ase Number                    | r   |   | _                           | MM  | / DD / YYYY                                    |                                 |
| Off  | ioial E                       | orm 106 l                                   |   |                             |   | -  | or 2 because Debtor 2           |
|      |                               | orm 106J                                    |   |                             | — mair  | ntains a separate hou                          | sehold.                         |
|      |                               | e J: Your Ex                                |   |                             |   |  | 12/14                           |
| more | -                             |   |   |                             | are equally responsible for<br>iges, write your name and ca |  |                                 |
|      |                               | Describe Your Household                     | I   |                             |   |  |                                 |
| 1. I |                               | Go to line 2.  Does Debtor 2 live in a  No. | separate household? st file a separate Schedulo | ə J.                        |   |  |                                 |
| 2.   | Do you h                      | nave dependents?                            | X No  |                             | Dependent's relationshi                                     |  | Does dependent live             |
|      | Do not lis<br>Debtor 2        | st Debtor 1 and                             |   | this information for dent   | Debtor 1 or Debtor 2  | age  | with you?  X No                 |
|      | Do not st                     | tate the dependents'                        |   |                             |   |  | Yes                             |
|      | names.                        |   |   |                             |   |  | X No                            |
|      |                               |   |   |                             |   |  | Yes                             |
|      |                               |   |   |                             |   |  | X No                            |
|      |                               |   |   |                             |   |  | Yes                             |
|      |                               |   |   |                             |   |  | X No                            |
|      |                               |   |   |                             |   |  | Yes X No                        |
|      |                               |   |   |                             |   |  | Yes                             |
| 3.   | Do your                       | expenses include                            | X No  |                             |   |  | 1                               |
|      | •                             | s of people other than and your dependents? | H   |                             |   |  |                                 |
|      |                               |   |   |                             |   |  |                                 |
|      |                               | expenses as of your b                       |   | ess you are using this for  | m as a supplement in a Cha                                  | oter 13 case to report                         |                                 |
| exp  | -                             | f a date after the bankr                    |   |                             | , check the box at the top of                               | •  |                                 |
|      | -                             | -   | =   | nce if you know the value   |   |  | <b>V</b>                        |
| of s | uch assista                   | ance and have include                       | d it on <i>Schedule I: Your I</i>               | ncome (Official Form 106    | l.)   |  | Your expenses                   |
| 4.   |                               | -   | expenses for your reside                        | ence. Include first mortgag | e payments and  |  | \$325.00                        |
|      | -                             | for the ground or lot.                      |   |                             |   | 4.   | φ323.00                         |
|      |                               | eal estate taxes                            |   |                             |   | 4a.  | \$0.00                          |
|      |                               | operty, homeowner's, or                     | renter's insurance                              |                             |   | 4b.  | \$25.00                         |
|      | 4c. Ho                        | ome maintenance, repai                      | r, and upkeep expenses                          |                             |   | 4c.  | \$0.00                          |
|      | 4d. Ho                        | meowner's association                       | or condominium dues                             |                             |   | 4d.  | \$0.00                          |
|      |                               |   |   |                             |   |  |                                 |

Page 1 of 3

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Case Number (if known) \_

Debtor 1 Gregory

 Gregory
 Stephen
 Capra

 First Name
 Middle Name
 Last Name

Your expenses \$0.00 5 Additional Mortgage payments for your residence, such as home equity loans 6. **Utilities:** \$0.00 6a. 6a. Electricity, heat, natural gas \$0.00 6b. Water, sewer, garbage collection \$215.00 Telephone, cell phone, internet, satellite, and cable service \$ 0.00 Other. Specify: 6d. \$500.00 7. 7. Food and housekeeping supplies \$0.00 8. 8. Childcare and children's education costs \$100.00 9. Clothing, laundry, and dry cleaning 10. \$30.00 10. Personal care products and services \$50.00 11. Medical and dental expenses 11. \$245.00 **Transportation.** Include gas, maintenance, bus or train fare. 12. Do not include car payments. \$0.00 13. Entertainment, clubs, recreation, newspapers, magazines, and books Charitable contributions and religious donations 14. \$20.00 14. 15. Insurance. Do not include insurance deducted from your pay or included in lines 4 or 20. \$3.00 15a. 15a Life insurance \$0.00 15b. Health insurance 15b. \$128.00 15c. Vehicle insurance 15c. \$0.00 15d. 15d. Other insurance. Specify: 16. Taxes. Do not include taxes deducted from your pay or included in lines 4 or 20. \$0.00 16 17. Installment or lease payments: \$357.00 17a. 17a. Car payments for Vehicle 1 \$0.00 17b. Car payments for Vehicle 2 17b \$0.00 17c. 17c. Other. Specify:\_ \$0.00 17d. Other. Specify: 17d. 18. Your payments of alimony, maintenance, and support that you did not report as deducted \$0.00 from your pay on line 5, Schedule I, Your Income (Official Form 106I). 18. 19. Other payments you make to support others who do not live with you. \$0.00 19. Other real property expenses not included in lines 4 or 5 of this form or on Schedule I: Your Income. 20a. Mortgages on other property 20a. \$ 0.00 20b. \$ 0.00 20b. Real estate taxes \$ 0.00 20c. Property, homeowner's, or renter's insurance 20c. \$ 0.00 20d. 20d. Maintenance, repair, and upkeep expenses \$ 0.00 20e 20e. Homeowner's association or condominium dues

Schedule J: Your Expenses

Official Form 106J

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| Debtor | 1 0109       | ory Stephen  | Сарга  | Case Number (If known) |               |            |
|--------|--------------|--|--|------------------------|---------------|------------|
|        | First Na     | me Middle Name   | Last Name  |                        |               |            |
| 21.    | Other. S     | pecify:Postage/Bank Fees (\$5.00),   |  | _                      | 21.           | \$5.00     |
| 22     | Your mo      | nthly expense: Add lines 4 through 21.   |  |                        | 22.           | \$2,003.00 |
|        | The resu     | It is your monthly expenses.   |  |                        |               |            |
|        |              |  |  |                        |               |            |
|        |              |  |  |                        |               |            |
| 23.    | Calculate    | your monthly net income.   |  |                        |               |            |
|        | 23a.         | Copy line 12 (your comibined monthly   | income) from Schedule I.   |                        | 23a.          | \$2,898.25 |
|        | 23b.         | Copy your monthly expenses from line   | e 22 above.  |                        | 23b. <b>–</b> | \$2,003.00 |
|        | 23c.         | Subtract your monthly expenses from  | your monthly income.   |                        | 23c.          | \$895.25   |
|        |              | The result is your monthly net income  | o.   |                        |               |            |
|        |              |  |  |                        |               |            |
|        |              |  |  |                        |               |            |
|        |              |  |  |                        |               |            |
|        |              |  |  |                        |               |            |
| 04     | D            |  | and the same of th | #II- 4L:- f            |               |            |
| 24.    | -            | expect an increase or decrease in your apple, do you expect to finish paying for you |  |                        |               |            |
|        |              | e payment to increase or decrease becar  | •  | • •                    |               |            |
|        | X No         | payment to increase or decrease becar  | use of a mounication to the terms of y   | our mortgage:          |               |            |
|        | $\mathbf{H}$ |  |  |                        |               |            |
|        | Yes          | Explain Here:  |  |                        |               |            |
|        |              |  |  |                        |               |            |
|        |              |  |  |                        |               |            |
|        |              |  |  |                        |               |            |
|        |              |  |  |                        |               |            |

 Official Form 106J
 Record #
 708904
 Schedule J: Your Expenses
 Page 3 of 3

# Official Form 106 Dec

### **Declaration About an Individual Debtor's Schedules**

12/15

If two married people are filing together, both are equally responsible for supplying correct information.

You must file this form whenever you file bankruptcy schedules or amended schedules. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

| Sign Below  |   |
|---|---|
| Did you pay or agree to pay someone who is NOT an attorney to help you fill out bankruptcy forms? |   |
| No  |   |
| Yes. Name of Person   | Attach Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119). |
|   |   |
|   |   |
| Under penalty of perjury, I declare that I have read th correct.                                  | ne summary and schedules filed with this declaration and that they are true and               |
|   |   |
| ✗ /s/ Gregory Stephen Capra   | ×   |
| Signature of Debtor 1   | Signature of Debtor 2   |
| Date 04/29/2016   | Date  |
| MM / DD / YYYY  | Date<br>MM / DD / YYYY  |
|   |   |

| Fill in this in     | Fill in this information to identify your case: |                                     |                  |   |
|---------------------|---|-------------------------------------|------------------|---|
| Debtor 1            | Gregory First Name                              | Stephen  Middle Name                | Capra  Last Name | _ |
| Debtor 2            |   |                                     | <u> </u>         | _ |
| (Spouse, if filing) | First Name                                      | Middle Name                         | Last Name        |   |
| United States       | Bankruptcy Court for                            | the : <u>NORTHERN</u> District of _ |                  |   |
| Case Number         | r   |                                     | (State)          |   |
| (If known)          |   |                                     |                  |   |

### Official Form 107

#### Statement of Financial Affairs for Individuals Filing for Bankruptcy

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known) Answer every question

|   | and Where You Lived Before         |                  |                |
|---|------------------------------------|------------------|----------------|
| What is your current marital status?  |                                    |                  |                |
| Married   |                                    |                  |                |
| Not married   |                                    |                  |                |
| During the last 3 years, have you lived anywh   | ere other than where you live no   | w?               |                |
| No.   |                                    |                  |                |
| Yes. List all of the places you lived in the last   | st 3 years. Do not include where y | ou live now.     |                |
| Debtor 1  | Dates Debtor 1                     | Debtor 2:        | Dates Debtor 2 |
|   | lived there                        | Same as Debtor 1 | lived there    |
| 12745 Carriage Ln   | FROM 03/2014                       |                  | Same as Debtor |
| Crestwood IL 60445-1026   | To 03/2014                         |                  |                |
| 01031W000 IE 00440 1020   |                                    |                  |                |
|   |                                    |                  |                |
| Within the last 8 years, did you ever live with property states and territories include Arizona                   | - ·                                |                  |                |
|   | a, California, Idaho, Louisiana, N |                  |                |
| property states and territories include Arizona and Wisconsin.)  No.  Yes. Make sure you fill out Schedule H: You | a, California, Idaho, Louisiana, N |                  |                |
| property states and territories include Arizona and Wisconsin.)  No.  Yes. Make sure you fill out Schedule H: You | a, California, Idaho, Louisiana, N |                  |                |
| property states and territories include Arizona and Wisconsin.)  No.  Yes. Make sure you fill out Schedule H: You | a, California, Idaho, Louisiana, N |                  |                |
| property states and territories include Arizona and Wisconsin.)  No.  Yes. Make sure you fill out Schedule H: You | a, California, Idaho, Louisiana, N |                  | -              |
| property states and territories include Arizona and Wisconsin.)  No.  Yes. Make sure you fill out Schedule H: You | a, California, Idaho, Louisiana, N |                  |                |
| property states and territories include Arizona and Wisconsin.)  No.  Yes. Make sure you fill out Schedule H: You | a, California, Idaho, Louisiana, N |                  |                |
| property states and territories include Arizona and Wisconsin.)  No.  Yes. Make sure you fill out Schedule H: You | a, California, Idaho, Louisiana, N |                  | -              |

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Debtor 1 Gregory Stephen Capra Case Number (if known) First Name Middle Name Last Name 04 Did you have any income from employment or from operating a business during this year or the two previous calendar years? Fill in the total amount of income you received from all jobs and all businesses, including part-time activities. If you are filing a joint case and you have income that you receive together, list it only once under Debtor 1. ☐ No. Yes. Fill in the details Debtor 1 Debtor 2 Sources of income **Gross income** Sources of income **Gross income** Check all that apply (before deductions and Check all that apply (before deductions and exclusions) exclusions) Wages, commissions, Wages, commissions, \$7,101.76 From January 1 of current year until bonuses, tips bonuses, tips the date you filed for bankruptcy: Operating a business Operating a business Wages, commissions, \$21,234.15 Wages, commissions, For last calendar year: bonuses, tips bonuses, tips (January 1 to December 31, 2015) Operating a business Operating a business Wages, commissions, \$21,000(Est) Wages, commissions, For the calendar year before that: bonuses, tips bonuses, tips (January 1 to December 31, 2014) Operating a business Operating a business 05 Did you receive any other income during this year or the two previous calendar years? Include income regardless of whether that income is taxable. Examples of other income are alimony; child support; Social Security, unemployment, and other public benefit payments; pensions; rental income; interest; dividends; money collected from lawsuits; royalties; and gambling and lottery winnings. If you are filing a joint case and you have income that you received together, list it only once under Debtor 1. List each source and the gross income from each source separately. Do not include income that you listed in line 4. Yes. Fill in the details Debtor 1 Debtor 2 Sources of income **Gross income** Sources of income **Gross income** Describe below. (before deductions and Describe below. (before deductions and exclusions) exclusions) \$6,332 Social Security From January 1 of current year until the date you filed for bankruptcy: \$18,960(est) Social Security For last calendar year: (January 1 to December 31, 2015) Social Security \$18,500(est) For last calendar year: (January 1 to December 31, 2014)

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Document Page 39 of 58 Capra Stephen Gregory Case Number (if known) \_

|    | First Name   | Middle Name   | Last Name  |  |   |   |  |
|----|--|---|--|--|---|---|--|
| P  | Part 3: List Cer   | tain Payments You Made Before You   | Filed for Bankruptcy                                 |  |   |   |  |
| 06 | Are either Debto   | or 1's or Debtor 2's debts primarily  | consumer debts?                                      |  |   |   |  |
|    | No. Neither Debtor 1 nor Debtor 2 has primarily consumer debts. Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."  During the 90 days before you filed for bankruptcy, did you pay any creditor a total of \$6,225* or more? |   |  |  |   |   |  |
|    | ☐ No.  | Go to line 7.   |  |  |   |   |  |
|    | tota   | s. List below each creditor to whom y<br>il amount you paid that creditor. Do r<br>d support and alimony. Also, do not<br>adjustment on 4/01/16 and every 3 y               | not include payments for include payments to ar      | or domestic support oblinationney for this bankro    | gations, such as uptcy case.                            |   |  |
|    | _  | r 1 or Debtor 2 or both have primar<br>the 90 days before you filed for ban   | •  | ny creditor a total of \$60                          | 00 or more?   |   |  |
|    | ☐ No.  | Go to line 7.   |  |  |   |   |  |
|    | Yes. List below each creditor to whom you paid a total of \$600 or more and the total amount you paid that creditor. Do not include payments for domestic support obligations, such as child support and alimony. Also, do not include payments to an attorney for this bankruptcy case.                           |   |  |  |   |   |  |
|    |  |   | Dates of payments                                    | Total amount paid                                    | Amount you still o                                      | owe Was this payment for  |  |
|    |  | Crescent BANK AND TRUS 5401 Jefferson Hwy Ste D Harahan LA 70123  | Monthly  | \$ 1,068   | \$ 13,420   | <ul> <li>Mortgage</li> <li>Car</li> <li>Credit card</li> <li>Loan repayment</li> <li>Suppliers or vendors</li> <li>Other</li> </ul> |  |
| 07 | Insiders include corporations of wagent, including such as child sup   | fore you filed for bankruptcy, did you your relatives; any general partners; which you are an officer, director, per one for a business you operate as a oport and alimony. | relatives of any generations on in control, or owner | al partners; partnerships<br>r of 20% or more of the | of which you are a general ir voting securities; and an | y managing  |  |
|    |  |   | Dates of payment                                     | Total amount paid                                    | Amount you still owe                                    | Reason for this payment   |  |
| 08 | <ul> <li>Within 1 year before you filed for bankruptcy, did you make any payments or transfer any property on account of a debt that benefited an insider?</li> <li>Include payments on debts guaranteed or cosigned by an insider.</li> <li>No.</li> <li>Yes. List all payments to an insider.</li> </ul>         |   |  |  |   |   |  |
|    |  |   | Dates of payment                                     | Total amount paid                                    | Amount you still owe                                    | Reason for this payment Include creditor's name   |  |
| ŀ  | Part 4: Identify   | Legal actions, Repossessions, and F   | oreclosures  |  |   |   |  |
|    |  |   |  |  |   |   |  |

Debtor 1

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Gregory Stephen Capra Case Number (if known) First Name Middle Name Last Name Within 1 year before you filed for bankruptcy, were you a party in any lawsuit, court action, or administrative proceeding? List all such matters, including personal injury cases, small claims actions, divorces, collection suits, paternity actions, support or custody modifications, and contract disputes. Yes. Fill in the details. Nature of the case Court or agency Status of the case Ford Motor Credit Co Llc VS Gregory Pending Contract Circuit Court of Cook County, First Municipal Division On appeal Concluded CASE NUMBER#11M1173457 Within 1 year before you filed for bankruptcy, was any of your property repossessed, foreclosed, garnished, attached, seized, or levied? Check all that apply and fill in the details below. No. Go to line 11 Yes. Fill in the information below. Describe the property Date Value of the property Ford Motor Credit Money 4/22/16 and 4/29/16 **Explain what happened** Property was repossessed. Property was foreclosed. Property was garnished. Property was attached, seized, or levied. Value of the property Describe the property Date \$237.45 per Month Internal Revenue Service Money Monthly levied from Social Security Check **Explain what happened** Property was repossessed. Property was foreclosed. Property was garnished. Property was attached, seized, or levied. 11 Within 90 days before you filed for bankruptcy, did any creditor, including a bank or financial institution, set off any amounts from your accounts or refuse to make a payment because you owed a debt? No. Go to line 11 Yes. Fill in the information below. 12 Within 1 year before you filed for bankruptcy, was any of your property in the possession of an assignee for the benefit of creditors, a court-appointed receiver, a custodian, or another official? No. ☐ Yes. **List Certain Gifts and Contributions** 13 Within 2 years before you filed for bankruptcy, did you give any gifts with a total value of more than \$600 per person? No. Yes. Fill in the details for each gift.

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| Debto | or 1  | Glegory                             | Stephen  | Сарга                                    | Case Number (If know          | /n)                         |  |
|-------|-------|-------------------------------------|--|--|-------------------------------|-----------------------------|--|
|       |       | First Name                          | Middle Name  | Last Name                                |                               |                             |  |
| 14    | Wit   | hin 2 years befo                    | ore you filed for bankruptcy, did                                  | you give any gifts or contributions wi   | th a total value of more thar | \$600 to any ch             | arity?                                     |
|       | П     | No.                                 |  |  |                               |                             |  |
|       | _     |                                     | lata lla facca de la lla   |  |                               |                             |  |
|       |       | Yes. Fill in the c                  | letails for each gift.   |  |                               |                             |  |
|       |       | Gifts or contrib<br>total more than | utions to charities that<br>\$600                                  | Describe what you contributed            |                               | Date you contributed        | Value                                      |
|       |       | St Johns,1844                       | Lincoln Ave, Whiting, IN_  | Money                                    | v                             | Veekly                      | \$5 / week                                 |
|       |       | 46394                               |  |  |                               |                             |  |
|       |       |                                     |  |  |                               |                             |  |
|       |       | Orland Park 6                       | <u>4327 Highland Ave,</u><br>0462                                  |  |                               |                             |  |
|       |       |                                     |  |  |                               |                             |  |
| P     | art 6 | List Certain                        | n Losses   |  |                               |                             |  |
| 15    | Wif   | hin 1 year befor                    | e vou filed for bankruptcy or si                                   | nce you filed for bankruptcy, did you lo | ose anything because of the   | eft. fire. other di         | saster, or                                 |
|       |       | mbling?                             | o youou .o. uuup.o, o. o   | ,  | u                             | ,,                          |  |
|       |       | No.                                 |  |  |                               |                             |  |
|       | _     |                                     | letails for each gift.   |  |                               |                             |  |
|       | ш     | 103.1 111 111 1110 0                | ictulis for cach gift.   |  |                               |                             |  |
| P     | art 7 | List Certai                         | n Payments or Transfers  |  |                               |                             |  |
| 16    | \A/i+ | hin 1 year hefe                     | o you filed for hankruptcy, did y                                  | you or anyone else acting on your beh    | alf nav or transfor any prop  | orty to anyone y            | you consulted                              |
| 10    |       |                                     | e you med for bankruptcy, did y<br>kruptcy or preparing a bankrupt |  | air pay or transfer any prop  | arty to anyone y            | rou consulted                              |
|       | Inc   | lude any attorne                    | eys, bankruptcy petition prepare                                   | ers, or credit counseling agencies for s | services required in your ba  | nkruptcy.                   |  |
|       | П     | No.                                 |  |  |                               |                             |  |
|       |       | Yes. Fill in the c                  | letails  |  |                               |                             |  |
|       | _     |                                     |  |  |                               |                             |  |
|       |       | Party Contact II                    | nfo  | Description and value of any prope       | -                             | Date payment<br>or transfer | Amount of payment                          |
|       |       | Geraci Law L.                       | L.C.   |  |                               |                             | Payment/Value:                             |
|       |       | 55 E. Monroe                        | Street #3400   |  |                               |                             | \$2,195.00: \$465.00 paid prior to filing, |
|       |       | Chicago,IL 60                       | 603  |  |                               |                             | balance to be paid                         |
|       |       |                                     |  |  |                               |                             | after case filing.                         |
|       |       |                                     |  |  |                               |                             |  |
|       |       |                                     |  |  |                               |                             |  |
|       |       |                                     |  |  |                               |                             |  |
|       |       | Party Contact I                     | nfo  | Description and value of any prope       |                               | Date payment or transfer    | Amount of payment                          |
|       |       | Hananwill Cre                       | dit Counseling   | Credit Counseling Services               |                               | 016                         | \$25.00                                    |
|       |       | 115 N. Cross                        |  |  |                               |                             |  |
|       |       | Robinson, IL 6                      |  |  |                               |                             |  |
|       |       |                                     |  |  |                               |                             |  |
|       |       |                                     |  |  |                               |                             |  |
|       |       |                                     |  |  |                               |                             |  |
|       |       |                                     |  |  |                               |                             |  |
|       |       |                                     |  |  |                               |                             |  |
| 17    | Wit   | hin 1 year befor                    | e you filed for bankruptcy, did y                                  | you or anyone else acting on your beh    | alf pay or transfer any prop  | erty to anyone v            | vho  |
|       | -     |                                     | =  | o make payments to your creditors?       |                               |                             |  |
|       | _     | _                                   | payment or transfer that you lis                                   | sieu VII IIIIE 10.                       |                               |                             |  |
|       | _     | No.                                 |  |  |                               |                             |  |
|       |       | Yes. Fill in the o                  | letails.   |  |                               |                             |  |
|       |       |                                     |  |  |                               |                             |  |
|       |       |                                     |  |  |                               |                             |  |
|       |       |                                     |  |  |                               |                             |  |

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Gregory Stephen Capra Case Number (if known) Debtor 1 First Name Middle Name Last Name Within 2 years before you filed for bankruptcy, did you sell, trade, or otherwise transfer any property to anyone, other than property transferred in the ordinary course of your business or financial affairs? Include both outright transfers and transfers made as security (such as the granting of a security interest or mortgage on your property). Do not include gifts and transfers that you have already listed on this statement. Yes. Fill in the details for each gift. 19 Within 10 years before you filed for bankruptcy, did you transfer any property to a self-settled trust or similar device of which you are a beneficiary? (These are often called asset-protection devices.) No. Yes. Fill in the details for each gift. List Certain Financial Accounts, Instruments, Safe Deposit Boxes, and Storage Units Part 8: Within 1 year before you filed for bankruptcy, were any financial accounts or instruments held in your name, or for your benefit, closed, sold, moved, or transferred? Include checking, savings, money market, or other financial accounts; certificates of deposit; shares in banks, credit unions, brokerage houses, pension funds, cooperatives, associations, and other financial institutions. No Yes. Fill in the details. Last 4 digits of account number Type of account or Date account was Last balance before instrument closed, sold, moved, closing or transfer or transferred Do you now have, or did you have within 1 year before you filed for bankruptcy, any safe deposit box or other depository for securities, cash, or other valuables? No. Yes. Fill in the details. Describe the contents Who else had access to it? Do you still have it? 22 Have you stored property in a storage unit or place other than your home within 1 year before you filed for bankruptcy? Yes. Fill in the details. Who else has or had access to it? Describe the contents Do you still have it? **Identify Property You Hold or Control for Someone Else** Do you hold or control any property that someone else owns? Include any property you borrowed from, are storing for, or hold in trust for someone. No Yes. Fill in the details. Where is the property? Describe the property Value **Give Details About Environmental Information** Part 10: For the purpose of Part 10, the following definitions apply: Environmental law means any federal, state, or local statute or regulation concerning pollution, contamination, releases of hazardous or toxic substances, wastes, or material into the air, land, soil, surface water, groundwater, or other medium, including statutes or regulations controlling the cleanup of these substances, wastes, or material. Site means any location, facility, or property as defined under any environmental law, whether you now own, operate, or utilize it or used to own, operate, or utilize it, including disposal sites. Hazardous material means anything an environmental law defines as a hazardous waste, hazardous substance, toxic substance, hazardous material, pollutant, contaminant, or similar term. Report all notices, releases, and proceedings that you know about, regardless of when they occurred.

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| Debto | r 1    | Gregory                   | Stephen                 | Capra                                | Case Number (if known)                            |                    |
|-------|--------|---------------------------|-------------------------|--------------------------------------|---|--------------------|
|       |        | First Name                | Middle Name             | Last Name                            |   |                    |
| 24    | Has    | any governmental          | unit notified you that  | vou may be liable or potentially lia | able under or in violation of an environmental l  | aw?                |
|       | _      |                           | unit notinou you that   | you may be nable of petermany in     |   |                    |
|       | _      | No.                       |                         |                                      |   |                    |
|       |        | Yes. Fill in the detail   | ls.                     |                                      |   |                    |
|       |        |                           |                         | Governmental unit                    | Environmental law, if you know it                 | Date of notice     |
| 25    | Uasi   | o var patified and        |                         |                                      | 2   |                    |
| 25    | пач    | e you notined any (       | governmental unit of    | any release of hazardous material    | f   |                    |
|       |        | No.                       |                         |                                      |   |                    |
|       |        | Yes. Fill in the detail   | ls.                     |                                      |   |                    |
|       |        |                           |                         | Governmental unit                    | Environmental law, if you know it                 | Date of notice     |
|       |        |                           |                         |                                      |   |                    |
| 26    | Hav    | e you been a party        | in any judicial or adm  | inistrative proceeding under any     | environmental law? Include settlements and or     | ders.              |
|       |        | No.                       |                         |                                      |   |                    |
|       | $\Box$ | Yes. Fill in the detail   | ls.                     |                                      |   |                    |
|       | _      |                           |                         | Court or agency                      | Nature of the case                                | Status of the case |
|       |        |                           |                         | · ·                                  |   |                    |
| Pa    | rt 11  | Give Details Ab           | out Your Business or C  | onnections to Any Business           |   |                    |
|       |        |                           |                         |                                      |   | _                  |
| 27    | With   |                           | -                       |                                      | e any of the following connections to any busir   | less?              |
|       |        | A sole proprieto          | or or self-employed in  | a trade, profession, or other activ  | ity, either full-time or part-time                |                    |
|       |        | A member of a l           | imited liability compa  | ny (LLC) or limited liability partne | rship (LLP)                                       |                    |
|       |        | A partner in a pa         | artnership              |                                      |   |                    |
|       |        | An officer, direct        | tor, or managing exe    | cutive of a corporation              |   |                    |
|       |        |                           |                         | or equity securities of a corporati  | on  |                    |
|       |        |                           |                         | or equity economics or a corporati   |   |                    |
|       |        | No. None of the abo       | ve applies. Go to Par   | 12.                                  |   |                    |
|       | $\Box$ | Yes. Check all that a     | apply above and fill in | he details below for each business.  |   |                    |
|       |        |                           |                         |                                      |   |                    |
| 28    | With   | hin 2 vears before v      | ou filed for bankrupto  | cv. did vou give a financial stateme | ent to anyone about your business? Include all    | financial          |
|       |        | itutions, creditors,      |                         | ,,, , g                              | ,,  |                    |
|       |        | No.                       |                         |                                      |   |                    |
|       | =      | Yes. Fill in the detail   | lo.                     |                                      |   |                    |
|       | ш      | res. I ill ill the detail |                         | Date issued                          |   |                    |
|       |        |                           |                         | Date 133ded                          |   |                    |
| Par   | t 12:  | Sign Below                |                         |                                      |   |                    |
| Ι.    | have   | a road the answers        | on this Statement of I  | inancial Affairs and any attachme    | ents, and I declare under penalty of perjury that | the                |
|       |        |                           |                         |                                      | ealing property, or obtaining money or property   |                    |
|       |        |                           |                         |                                      | isonment for up to 20 years, or both.             | •                  |
| 1     | 8 U.S  | S.C. §§ 152, 1341, 1      | 519, and 3571.          |                                      |   |                    |
|       |        |                           |                         |                                      |   |                    |
|       |        |                           |                         |                                      |   |                    |
| .     |        | /s/ Gregory Step          |                         | <b>x</b>                             | e of Debtor 2                                     |                    |
|       |        | Signature of Debtor       | 1                       | Signature                            | e of Debtor 2                                     |                    |
|       |        |                           |                         |                                      |   |                    |
|       |        | Date 04/29/2016 MM / DD / |                         | Date                                 | M / DD / YYYY                                     |                    |
|       |        | MM / DD /                 | YYYY                    | M                                    | M / DD / YYYY                                     |                    |
|       |        |                           |                         |                                      |   |                    |
| D     | id y   | ou attach additiona       | I pages to Your State   | ment of Financial Affairs for Indiv  | iduals Filing for Bankruptcy (Official Form 107)  | ?                  |
| ١.,   |        |                           |                         |                                      |   |                    |
|       | N      |                           |                         |                                      |   |                    |
|       | Y      | 'es                       |                         |                                      |   |                    |
| _     | id v   | ou nay or agree to        | nav someone who is:     | not an attorney to help you fill out | hankruntey forms?                                 |                    |
| "     | iu y   | ou pay or agree to        | pay someone who is i    | not an attorney to help you fill out | Samulpicy forms:                                  |                    |
|       | N      | lo                        |                         |                                      |   |                    |
|       | ΠY     | es. Name of perso         | n                       |                                      | Attach the Bankruptcy Petition Preparer           | 's Notice,         |
|       |        | •                         |                         |                                      | Declaration, and Signature                        |                    |
|       |        |                           |                         |                                      |   |                    |

Filad 04/20/16 Entered 04/29/16 16:48:13 Desc Main Fill in this information to identify your case: 4 of 58 Stephen Capra Gregory Debtor 1 First Name Middle Name Last Name Debtor 2 (Spouse, if filing) First Name Middle Name Last Name United States Bankruptcy Court for the : <u>NORTHERN DISTRICT OF ILLINOIS EASTERN</u> DIVISION District of ILLINOIS Check if this is an amended filing

#### Official Form 108

### Statement of Intention for Individuals Filing Under Chapter 7

12/15

If you are an individual filing under chapter 7, you must fill out this form if:

- creditors have claims secured by your property, or
- $\blacksquare$  you have leased personal property and the lease has not expired.

You must file this form with the court within 30 days after you file your bankruptcy petition or by the date set for the meeting of creditors,

whichever is earlier, unless the court extends the time for cause. You must also send copies to the creditors and lessors you list.

If two married people are filing together in a joint case, both are equally responsible for supplying correct information.

Both debtors must sign and date the form.

Be as complete and accurate as possible. If more space is needed, attach a separate sheet to this form. On the top of any additional pages,

write your name and case number (if known).

| For any creditors that you listed in Part 1 of Scinformation below.             | dule D: Creditors Who Have Claims Secured I    | by Property (Official Form 106D), fill in the                                 |
|---|--|---|
| Identify the creditor and the property that is co                               | teral What do you intend to do secures a debt? | lo with the property that Did you claim the property as exempt on Schedule C? |
| Creditor's name: Crescent BANK AND TRUS  Description of property securing debt: | Retain the proportion A                        | erty and redeem it Yes  |
| Creditor's name:  Description of property securing debt:                        | Retain the proper Reaffirmation A              | erty and redeem it Yes  |
| Creditor's name:  Description of property securing debt:                        | Retain the propo                               | erty and redeem it Yes  |
| Creditor's name:  Description of property securing debt:                        | Retain the proportion A                        | erty and redeem it Yes  |

Gregory Case 16-14781 Stephen

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First Name

| List Your Unexpired Personal I | Property Leases |
|--------------------------------|-----------------|
|--------------------------------|-----------------|

| 5  | where and the surfice of the second (Official Forms 4000) |
|--|---|
| For any unexpired personal property lease that you listed in Schedule G: Executory Co      |   |
| fill in the information below. Do not list real estate leases. Unexpired leases are leases |   |
| ended. You may assume an unexpired personal property lease if the trustee does not a       | ssume it. 11 U.S.C. § 365(p)(2).                          |
| Describe your unexpired personal property leases   | Will the lease be assumed?                                |
| Lessor's name:   | ☐ No  |
| Lessol s hame.   |   |
| Description of leased  | Yes   |
| property:  |   |
| F - F - 9  |   |
| Lessor's name:   | ☐ No  |
|  | Yes   |
| Description of leased  | ☐ fes   |
| property:  |   |
|  |   |
| Lessor's name:   | □No   |
|  | Yes   |
| Description of leased  |   |
| property:  |   |
|  |   |
| Lessor's name:   | □No   |
|  | Yes   |
| Description of leased  |   |
| property:  |   |
|  |   |
| Lessor's name:   |   |
| Description of legand  | □Yes  |
| Description of leased property:  |   |
| property.  |   |
| Lessor's name:   | □No   |
|  | <u> </u>  |
| Description of leased  | ☐Yes  |
| property:  |   |
|  |   |
| Lessor's name:   | □No   |
|  |   |
| Description of leased  |   |
| property:  |   |
|  |   |
| Part 3: Sign Below   |   |
|  |   |
| Inder penalty of perjury, I declare that I have indicated my intention about any property  | of my estate that secures a debt and any                  |
| personal property that is subject to an unexpired lease.                                   |   |
|  |   |
| 🗶 /s/ Gregory Stephen Capra  |   |
| Signature of Debtor 1 Signature of Debtor  | 2   |
| Date Dated: 04/29/2016   |   |
| MM / DD / YYYY MM / DD / Y   | YYY   |

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B2030 (Form 2030) (12/15)

# United States Bankruptcy Court NORTHERN DISTRICT OF ILLINOIS EASTERN DIVISION

| n re  |   |  |
|---|---|--|
| Gregory Stephen Capra / Debtor  | Case No:  |  |
|   | Chapter: Chapter 7  |  |
| DISCLOSURE OF CO  | OMPENSATION OF ATTORNEY FOR DEBTOR  |  |
| compensation paid to me within one year before the filing of  | (b), I certify that I am the attorney for the above named debtor(s) as f the petition in bankruptcy, or agreed to be paid to me, for services emplation of or in connection with the bankruptcy case is as follows: |  |
| For legal services, I have agreed to accept   | \$2,195.00  |  |
| Prior to the filing of this statement I have received   | \$465.00  |  |
| Balance Due   | \$1,730.00  |  |
| 2. The source of the compensation paid to me was:   |   |  |
| Debtor(s) Other: (specify   |   |  |
| The source of compensation to be paid to me is:   |   |  |
|   |   |  |
| Debtor(s) Other: (specify   |   |  |
| I have not agreed to share the above-disclosed compof my law firm.                                  | npensation with any other person unless they are members and asso   | ciates                                 |
|   |   |  |
|   | sation with a other person or persons who are not members or asso   | ciates                                 |
| <ol> <li>In return for the above-disclosed fee, I have agreed to re<br/>case, including:</li> </ol> | ender legal service for all aspects of the bankruptcy   |  |
|   |   |  |
| <ul> <li>a. Analysis of the debtor's financial situation, and reparkruptcy;</li> </ul>              | ndering advice to the debtor in determining whether to file a petitio   | n in                                   |
| minupecy,   |   |  |
| b. Preparation and filing of any petition, schedules, st  | tatements of affairs and plan which may be required;  |  |
| c. Representation of the debtor at the meeting of cred  | litors and confirmation hearing, and any adjourned hearings thereof   | •                                      |
|   |   |  |
| 6. By agreement with the debtor(s), the above-disclosed fe  | ee does not include the following service:  |  |
|   | dates, amendments to schedules, adversary complaints or co  | onversions to another                  |
| chapter, judicial lien avoidances, dischargeability actions, other                                  |   | ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,, |
|   | CERTIFICATION   |  |
|   | e statement of any agreement or arrangement for   |  |
| payment to<br>me for representation of the debtor(s) in this  | s bankruptcy proceedings.   |  |
| Date: 04/29/2016  | /s/ Salvador Gutierrez  |  |
| Date  | Signature of Attorney   |  |
|   | Geraci Law L.L.C.   |  |
|   | Name of law firm  |  |

Page 1 of 1 708904 Record #

Geraci Law L.L.C.
Charonach Hadrigathers 259 E. Monroei Gree (#3400 Cheago Filtered 04/33/156016:48:13 Cheago Filtered 04

Date: 4/29/2016



#### **Chapter 7 Retainer Agreement**

The undersigned hires Geraci Law L.L.C. and its associated attorneys for representation in a Chapter 7 bankruptcy under the following terms and conditions: Attorney fees for the Chapter 7 bankruptcy are \$ This amount does NOT INCLUDE court filing fees of \$335, or costs for credit counseling or financial management classes. This fee is based on the anticipated amount of work required to complete my case, and upon the information I have provided to date. If any information is incomplete or incorrect, the advice or Chapter may have to change, and this fee may have to be adjusted. This fee includes all work in the representation of my normal Chapter7, including preparation of my bankruptcy petition, schedules and other documents, first341 meeting, reaffirmations, normal correspondence with my creditors and myself, but does NOT include excessive work caused by you, missed 341 meetings, reopening the case, amendments to schedules, work on audits or asset cases, objections to exemptions, conversion to another chapter, evidentiary hearings, other contested matters or motions, or adversary proceedings, because these cannot be predicted in setting a flat fee. For work done on these matters, we bill between \$275/hr and \$450/hr for attorney time, based on the attorney doing the work, and \$85 to \$125/hr paralegal time. I agree that more than one attorney and paralegal will work on my case. Fees are "flat fees" and "advance payment retainers" for pre-filing work, become property of this firm on payment, and are deposited into the firm's operating account. Payments are applied to the "flat fee". You may elect to be billed on an hourly basis, but we have found a flat fee is cheaper and benefits you. If this contract is terminated by either party prior to the filing of the case, the firm will refund unearned fees based on the above rates with an accounting, and on request, submit any dispute to binding arbitration within 30 days. If I close my file or breach this contract I agree to pay for the work done to that time. I assign to my attorney all amounts tendered as filing fees or court costs and authorize my attorney to transfer said funds from his trust account to his operating account in payment of all outstanding fees owed by me if case is not filed. I understand that bankruptcy laws only allow me to protect a certain amount of my property, and if I have any unprotected property. I understand my Chapter 7 Trustee can sell it if I do not or cannot buy out the Trustee's interest and that the U.S. Trustee may object to my filing a Chapter 7 if they believe I have excess income and should be filing a Chapter 13. I agree to fully cooperate with my attorneys and provide all information requested at any point during the case. I understand that if I do not fully cooperate or provide complete and accurate information, my attorneys may withdraw from representation of me, with the permission of the Court. If I have secured debts that I wish to retain (mortgages, financed vehicles or other financed property) that I may be required to sign a reaffirmation agreement with the creditor in order to keep the property, and I must remain current on my payments. Many mortgage and car companies refuse to reaffirm the debt but we have found that if you keep up your payments you keep the property anyway. Debts not discharged if they not paid in full: student loans; educational debts & tuition; most tax debts: unfiled, trust fund or late filed tax; undisclosed debts; support/maintenance debts; fines, debts incurred by fraud, or after the case is filed, future condo/HOA dues or debts listed in your red or green folder as usually not discharged, or found non-dischargeable by a Judge. Representation limited to Bankruptcy Court We don't represent you in state court, or loan modifications or similar matters. I cannot transfer any property or incur any credit or debt without the express permission of my attorney or the Court and I must make full disclosure of all income, expenses, debts and assets in my initial consultation and on my bankruptcy petition. understand that if I fail to take my financial management class after filing but before discharge, my case may be closed without a discharge, and / will be/required to pay fees and costs to have it reopened. I have received the 11U.S.C § 527(a) disclosures. Debtor) (Joint Debtor) Attorney for the Debtor(s), Representing Geraci Law L.L.C. rev 150511

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## UNITED STATES BANKRUPTCY COURT NORTHERN DISTRICT OF ILLINOIS EASTERN DIVISION

In re

| Gregory Stephen Capra / Debtor | Bankruptcy Docket # |
|--------------------------------|---------------------|
|--------------------------------|---------------------|

Judge:

The above named Debtor(s) hereby verify that the attached list of creditors is true and correct to the best of our knowledge.

I DECLARE UNDER PENALTY OF PERJURY THAT THE FOREGOING IS TRUE AND CORRECT.

Dated: 04/29/2016 /s/ Gregory Stephen Capra

**Gregory Stephen Capra** 

X Date & Sign

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<sup>\*</sup> Joint debtors must provide information for both spouses. Penalty for making a false statement or concealing property: Fine up to \$500,000 or up to 5 years imprisonment or both. 18 U.S.C. 152 and 3571.

#### UNITED STATES BANKRUPTCY COURT

## NOTICE TO CONSUMER DEBTOR(S) UNDER §342(b) OF THE BANKRUPTCY CODE

In accordance with § 342(b) of the Bankruptcy Code, this notice to individuals with primarily consumer debts: (1) Describes briefly the services available from credit counseling services; (2) Describes briefly the purposes, benefits and costs of the four types of bankruptcy proceedings you may commence; and (3) Informs you about bankruptcy crimes and notifies you that the Attorney General may examine all information you supply in connection with a bankruptcy case.

You are cautioned that bankruptcy law is complicated and not easily described. Thus, you may wish to seek the advice of an attorney to learn of your rights and responsibilities should you decide to file a petition. Court employees cannot give you legal advice.

Notices from the bankruptcy court are sent to the mailing address you list on your bankruptcy petition. In order to ensure that you receive information about events concerning your case, Bankruptcy Rule 4002 requires that you notify the court of any changes in your address. If you are filing a **joint case** (a single bankruptcy case for two individuals married to each other), and each spouse lists the same mailing address on the bankruptcy petition, you and your spouse will generally receive a single copy of each notice mailed from the bankruptcy court in a jointly- addressed envelope, unless you file a statement with the court requesting that each spouse receive a separate copy of all notices.

#### 1. Services Available from Credit Counseling Agencies

With limited exceptions, § 109(h) of the Bankruptcy Code requires that all individual debtors who file for bankruptcy relief on or after October 17, 2005, receive a briefing that outlines the available opportunities for credit counseling and provides assistance in performing a budget analysis. The briefing must be given within 180 days <u>before</u> the bankruptcy filing. The briefing may be provided individually or in a group (including briefings conducted by telephone or on the Internet) and must be provided by a nonprofit budget and credit counseling agency approved by the United States trustee or bankruptcy administrator. The clerk of the bankruptcy court has a list that you may consult of the approved budget and credit counseling agencies. Each debtor in a joint case must complete the briefing.

In addition, after filing a bankruptcy case, an individual debtor generally must complete a financial management instructional course before he or she can receive a discharge. The clerk also has a list of approved financial management instructional courses. Each debtor in a joint case must complete the course.

#### 2. The Four Chapters of the Bankruptcy Code Available to Individual Consumer Debtors

#### Chapter 7: Liquidation (\$245 filing fee, \$75 administrative fee, \$15 trustee surcharge: Total fee \$335

Chapter 7 is designed for debtors in financial difficulty who do not have the ability to pay their existing debts. Debtors whose debts are primarily consumer debts are subject to a "means test" designed to determine whether the case should be permitted to proceed under chapter 7. If your income is greater than the median income for your state of residence and family size, in some cases, the United States trustee (or bankruptcy administrator), the trustee, or creditors have the right to file a motion requesting that the court dismiss your case under § 707(b) of the Code. It is up to the court to decide whether the case should be dismissed.

Under chapter 7, you may claim certain of your property as exempt under governing law. A trustee may have the right to take possession of and sell the remaining property that is not exempt and use the sale proceeds to pay your creditors.

The purpose of filing a chapter 7 case is to obtain a discharge of your existing debts. If, however, you are

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Form B 201A, Notice to Consumer Debtor(s)

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In re Gregory Page 2

found to have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge and, if it does, the purpose for which you filed the bankruptcy petition will be defeated.

Even if you receive a general discharge, some particular debts are not discharged under the law. Therefore, you may still be responsible for most taxes and student loans; debts incurred to pay nondischargeable taxes; domestic support and property settlement obligations; most fines, penalties, forfeitures, and criminal restitution obligations; certain debts which are not properly listed in your bankruptcy papers; and debts for death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs. Also, if a creditor can prove that a debt arose from fraud, breach of fiduciary duty, or theft, or from a willful and malicious injury, the bankruptcy court may determine that the debt is not discharged.

#### Chapter 13: Repayment of All or Part of the Debts of an Individual with Regular Income (\$235 filing fee, \$75 administrative fee: Total fee \$310)

Chapter 13 is designed for individuals with regular income who would like to pay all or part of their debts in installments over a period of time. You are only eligible for chapter 13 if your debts do not exceed certain dollar amounts set forth in the Bankruptcy Code.

Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, using your future earnings. The period allowed by the court to repay your debts may be three years or five years, depending upon your income and other factors. The court must approve your plan before it can take effect.

After completing the payments under your plan, your debts are generally discharged except for domestic support obligations; most student loans; certain taxes; most criminal fines and restitution obligations; certain debts which are not properly listed in your bankruptcy papers; certain debts for acts that caused death or personal injury; and certain long term secured obligations.

#### Chapter 11: Reorganization (\$1,167 filing fee, \$550 administrative fee: Total fee \$1,717)

Chapter 11 is designed for the reorganization of a business but is also available to consumer debtors. Its provisions are quite complicated, and any decision by an individual to file a chapter 11 petition should be reviewed with an attorney.

#### Chapter 12: Family Farmer or Fisherman (\$200 filing fee, \$75 administrative fee: Total fee \$275)

Chapter 12 is designed to permit family farmers and fishermen to repay their debts over a period of time from future earnings and is similar to chapter 13. The eligibility requirements are restrictive, limiting its use to those whose income arises primarily from a family-owned farm or commercial fishing operation.

#### 3. Bankruptcy Crimes and Availability of Bankruptcy Papers to Law Enforcement Officials

A person who knowingly and fraudulently conceals assets or makes a false oath or statement under penalty of perjury, either orally or in writing, in connection with a bankruptcy case is subject to a fine, imprisonment, or both. All information supplied by a debtor in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the United States Trustee, the Office of the United States Attorney, and other components and employees of the Department of Justice.

WARNING: Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information regarding your creditors, assets, liabilities, income, expenses and general financial condition. Your bankruptcy case may be dismissed if this information is not filed with the court within the time deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court. The

| Dated: 04/29/2016 | /s/ Gregory Stephen Capra    |   |
|-------------------|------------------------------|---|
|                   | Gregory Stephen Capra        |   |
| Dated: 04/29/2016 | /s/ Salvador Gutierrez       |   |
|                   | Attorney: Salvador Gutierrez | _ |

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| btor 1   | Gregory  | Stephen  | Capra   | Case Number (if kr   | nown)  |  |  |  |  |
|--|--|--|---|--|--|--|--|--|--|
| AUI I  | First Name   | Middle Name  | Last Name   |  |  |  |  |  |  |
| art 6:   | Answer These Question                              | s for Reporting Purposes   |   |  |  |  |  |  |  |
|  | hat kind of debts do                               | 16a Are your debts   | primarily consumer debt                                       | s? Consumer debts are defines onal, family, or household pu        | ned in 11 U.S.C. § 101(8)<br>urpose."                              |  |  |  |  |
|  | ou have?   | as "incurred by an individual primarily for a personal, family, or household purpose."  No. Go to line 16b.  Yes. Go to line 17.   |   |  |  |  |  |  |  |
|  |  | 16b. Are your debts primarily business debts? Business debts are debts that you incurred to obtain money for a business or investment or through the operation of the business or investment.  |   |  |  |  |  |  |  |
|  |  | □No. Go to lin<br>□Yes. Go to lin  |   |  |  |  |  |  |  |
|  |  | 16c. State the type of   | debts you owe that are not co                                 | onsumer debts or business de                                       | ebts.  |  |  |  |  |
|  |  |  |   |  |  |  |  |  |  |
|  | re you filing under<br>Chapter 7?                  |  | ng under Chapter 7. Go to lir                                 |  |  |  |  |  |  |
|  | •  | Yes. I am filing under Chapter 7. Do you estimate that after any exempt property is excluded and administrative expenses are paid that funds will be available to distribute to unsecured creditors?   |   |  |  |  |  |  |  |
|  | o you estimate that after<br>ny exempt property is | and the second of the second o |   |  |  |  |  |  |  |
|  | excluded and and administrative expenses           | Mo.  □ 1.  |   |  |  |  |  |  |  |
| a  | re paid that funds will be                         | <u></u> Yes.   |   |  |  |  |  |  |  |
|  | vailable for distribution o unsecured creditors?   |  |   |  |  |  |  |  |  |
| в. <b>I</b>  | low many creditors do                              | 1-49   | □ 1,000   | -5,000   | <b>25,001-50,000</b>   |  |  |  |  |
| 3  | ou estimate that you                               | 50-99  | ☐ 5,001   | -10,000<br>1-25,000  | ☐ 50,001-100,000<br>☐ More than 100,000                            |  |  |  |  |
| •  | owe?   | ☐ 100-199<br>☐ 200-999   | 10,00   | 1-25,000   |  |  |  |  |  |
|  | How much do you                                    | \$0-\$50,000   | <b>□</b> \$1,00   | 0,001-\$10 million   | □\$500,000,001-\$1 billion   |  |  |  |  |
|  | estimate your assets to                            | \$50,001-\$100,0   |   | 00,001-\$50 million  | \$1,000,000,001-\$10 billion                                       |  |  |  |  |
| ı  | be worth?  | \$100,001-\$500,   | <b>—</b>  | 100,001-\$100 million<br>1,000,001-\$500 million                   | ☐\$10,000,000,001-\$50 billion<br>☐More than \$50 billion          |  |  |  |  |
| ***************************************  |  | \$500,001-\$1 mil  |   |  | □\$500,000,001-\$1 billion   |  |  |  |  |
|  | How much do you                                    | \$0-\$50,000   | <u> </u>  | 00,001-\$10 million<br>000,001-\$50 million                        | □\$1,000,000,001-\$10 billion                                      |  |  |  |  |
|  | estimate your liabilities                          | \$50,001-\$100,0<br>\$100,001-\$500,   |   | 000,001-\$100 million  | ☐ \$10,000,000,001-\$50 billion                                    |  |  |  |  |
| 1  | to be?   | □ \$500,001-\$1 mi   |   | ,000,001-\$500 million   | ☐ More than \$50 billion   |  |  |  |  |
| Part   | 7: Sign Below                                      |  | •   |  |  |  |  |  |  |
| For y  |  | I have examined this correct.  | petition, and I declare under                                 | penalty of perjury that the info                                   | ormation provided is true and                                      |  |  |  |  |
|  |  | If I have chosen to file<br>of title 11, United Sta<br>under Chapter 7.  | e under Chapter 7, I am awar<br>tes Code. I understand the re | e that I may proceed, if eligibl<br>lief available under each chap | le, under Chapter 7, 11,12, or 13<br>pter, and I choose to proceed |  |  |  |  |
|  |  | If no attorney represents me and I did not pay or agree to pay someone who is not an attorney to help me fill out this document, I have obtained and read the notice required by 11 U.S.C. § 342(b).   |   |  |  |  |  |  |  |
| I request relief in accordance with the chapter of title 11, United States Code, specified in this petition. |  |  |   |  |  |  |  |  |  |
|  |  | I understand making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both.  18 U.S.C. §§ 152, 1341, 1519 and 3571.   |   |  |  |  |  |  |  |
|  |  | × 1907 3   |   | X  | ature of Debtor 2  |  |  |  |  |
|  |  | Signature of O   | <b>**</b>   | Эіўг   | attilo oi popioi a   |  |  |  |  |
|  |  | Executed on _  | Executed on   |  |  |  |  |  |  |

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|   | ·  |   | ige 32 of 30   |     |
|---|--|---|--|-----|
| Fill in this information to                       | identify your case:  |   | •  |     |
| Debtor 1 Gregory                                  | Stephen  | Capra   |  |     |
| First Name  | Middle Name  | Last Name   |  |     |
| Debtor 2 (Spouse, if filing) First Name           | Middle Name  | Last Name   |  |     |
| United States Bankruptcy Co Case Number(If known) | urt for the : <u>NORTHERN</u> District of  | f <u>ILLINOIS</u><br>(State)                              | ☐ Check if this is an amended filing   |     |
| official Form 106                                 | S Dec  |   |  |     |
| Official Form 106                                 | <u>Dec</u>   |   |  |     |
| eclaration Ab                                     | out an Individual  | Debtor's Sched  | lules 1  | 12/ |
| taining money or propert                          | never you file bankruptcy schedu<br>y by fraud in connection with a ba<br>152, 1341, 1519, and 3571. | les or amended schedules.<br>ankruptcy case can result ii | . Making a false statement, concealing property, or<br>n fines up to \$250,000, or imprisonment for up to 20 |     |
| Sign Below  |  |   |  |     |
| Did you hav or agree to                           | pay someone who is NOT an atto   | rney to help you fill out bar                             | nkruptcy forms?  |     |
| No  |  | •   |  |     |
| _   | on   | ·   | Attach Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119).                |     |
|   |  |   |  |     |
|   |  |   |  |     |
|   |  |   | and the declaration and that they are two and  |     |
| Under penalty of perjury                          | y, I declare that I have read the su   | mmary and schedules filed                                 | d with this declaration and that they are true and   |     |

Signature of Debtor 2

Date \_\_\_\_\_

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| ebtor                                   | 1 6  | Bregory             | Stephen                                  | Capra  | Case Number (if known)  |  |  |  |  |
|---|--|---------------------|--|--|---|--|--|--|--|
|   | -  | irst Name           | Middle Name                              | Last Name  |   |  |  |  |  |
| 21                                      |  | nv governer         | al unit notified you that you m          | av be liable or potentially  | liable under or in violation of an environmental law?   |  |  |  |  |
| 24                                      | mas a  | ny government       | ar ant notines you that you m            | -,   |   |  |  |  |  |
|   | No   |                     |  |  | 200   |  |  |  |  |
|   | ☐ Ye   | es. Fill in the det |  |  | Environmental law, if you know it Date of notice  |  |  |  |  |
|   |  |                     | Gover                                    | nmental unit   | Environmental law, ii you nitra ii  |  |  |  |  |
| o₽.                                     |  | matifical           | y governmental unit of any rel           | lease of hazardous mater   | ial?  |  |  |  |  |
| 20                                      | nave   | you nouned any      | y governmental unit of any let           |  |   |  |  |  |  |
|   | N  | 0.                  |  |  |   |  |  |  |  |
|   | ☐ Y  | es. Fill in the det |  | <u>.</u>   | Environmental law, if you know it Date of notice  |  |  |  |  |
|   |  |                     | Gover                                    | rnmental unit  | Environmental ian, il you movet   |  |  |  |  |
| 26                                      | Have   | you been a nar      | ty in any judicial or administra         | ative proceeding under a   | ny environmental law? include settlements and orders.   |  |  |  |  |
| -                                       | _  |                     | .,                                       | •  |   |  |  |  |  |
|   | N  |                     |  |  |   |  |  |  |  |
|   | ПΥ   | es. Fill in the de  | A. A | t or agency  | Nature of the case Status of the case   |  |  |  |  |
|   |  |                     | Coun                                     | or agency  |   |  |  |  |  |
|   |  | Oi Poteilo          | About Your Business or Connec            | tions to Any Business  |   |  |  |  |  |
|   | art 11:  |                     |  |  | till till win a same store to any business?   |  |  |  |  |
| 27                                      | Withi  | in 4 years befor    | e you filed for bankruptcy, dic          | l you own a business or  | have any of the following connections to any business?  |  |  |  |  |
|   |  |                     |  |  | ctivity, either full-time or part-time  |  |  |  |  |
| *************************************** | [  | A member of         | a limited liability company (L           | LC) or limited liability par   | rtnership (LLP)   |  |  |  |  |
|   |  | A partner in a      |  |  |   |  |  |  |  |
|   |  |                     | rector, or managing executive            |  |   |  |  |  |  |
|   | i  | An owner of         | at least 5% of the voting or eq          | uity securities of a corpo   | oration   |  |  |  |  |
|   | <b>1</b>   | No. None of the     | above applies. Go to Part 12.            |  |   |  |  |  |  |
| *************************************** |  |                     | at apply above and fill in the de        | etails below for each busin  | ess.  |  |  |  |  |
| *************************************** |  |                     |  |  |   |  |  |  |  |
| 28                                      | 8 Within 2 years before you filed for bankruptcy, did you give a financial statement to anyone about your business? Include all financial institutions, creditors, or other parties. |                     |  |  |   |  |  |  |  |
|   | 1  | No.                 |  |  |   |  |  |  |  |
| *************************************** |  | Yes. Fill in the de |  | NO. V. NAMES AND PROCESSOR STORY AND |   |  |  |  |  |
|   |  |                     | Date i                                   | issued   |   |  |  |  |  |
| Р                                       | art 12:  | Sign Below          |  |  |   |  |  |  |  |
|   |  |                     |  |  | to and I declare under penalty of perjury that the  |  |  |  |  |
|   |  |                     | Learnet Lunderstand that ma              | aking a false statement. C   | chments, and I declare under penalty of perjury that the concealing property, or obtaining money or property by fraud |  |  |  |  |
| 0000000                                 | in co  | nnection with a     | bankruptcy case can result in            | i fines up to \$250,000, or  | imprisonment for up to 20 years, or both.   |  |  |  |  |
|   | 18 U.  | S.C. §§ 152, 134    | 11, 1519, and 3574.                      |  |   |  |  |  |  |
|   |  | 10                  | \  |  |   |  |  |  |  |
|   |  | $\mathcal{K}$       |  | 40   |   |  |  |  |  |
|   | ×  | 1000                |  | X  | nature of Debtor 2  |  |  |  |  |
|   | -6   | Signature of De     | btor)                                    |  |   |  |  |  |  |
| 0000                                    | ,  |                     | 767                                      |  |   |  |  |  |  |
|   |  | Date <u> </u>       | <u>/2016</u>                             | Dat  | MM / DD / YYYY  |  |  |  |  |
|   | 1743   | MM / Di             | ו איז איז איז ט                          |  |   |  |  |  |  |
| 200                                     | 5 - Lating for Paper and John Form 107)?   |                     |  |  |   |  |  |  |  |
|   | Did you attach additional pages to Your Statement of Financial Affairs for Individuals Filing for Bankruptcy (Official Form 107)?  |                     |  |  |   |  |  |  |  |
|   | ■ No   |                     |  |  |   |  |  |  |  |
| 00000000                                | ☐ Yes  |                     |  |  |   |  |  |  |  |
| *COOCCOSCOS                             |  |                     |  |  |   |  |  |  |  |
| <b>\$</b>                               | Did you pay or agree to pay someone who is not an attorney to help you fill out bankruptcy forms?  |                     |  |  |   |  |  |  |  |
| X                                       | _  |                     |  |  |   |  |  |  |  |
| *************************************** |  | NO                  |  |  | Attach the Bankruptcy Petition Preparer's Notice,   |  |  |  |  |
|   |  | Yes. Name of p      | erson                                    |  | Attach the Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119).                     |  |  |  |  |
| *                                       |  |                     |  |  |   |  |  |  |  |

Case 16-14781 Doc 1 Filed 04/29/16 Entered 04/29/16 16:48:13 Desc Main Document Page 54 of 58 Case Number (if known) Capra Stephen Gregory Debtor 1 Last Name **List Your Unexpired Personal Property Leases** Part 2: For any unexpired personal property lease that you listed in Schedule G: Executory Contracts and Unexpired Leases (Official Form 106G), fill in the information below. Do not list real estate leases. Unexpired leases are leases that are still in effect; the lease period has not yet ended. You may assume an unexpired personal property lease if the trustee does not assume it. 11 U.S.C. § 365(p)(2). Will the lease be assumed? Describe your unexpired personal property leases ☐ No Lessor's name: ☐ Yes Description of leased property: ☐ No Lessor's name: ☐ Yes Description of leased property: ☐ No Lessor's name: Yes Description of leased property: □No Lessor's name: ☐Yes Description of leased property: ΠNo Lessor's name: ☐Yes

Lessor's name:

Description of leased property:

Part 3: Sign Below

Under penalty of perjury, I declare that I have indicated my intention about any property of my estate that secures a debt and any personal property that is subject to an unexpired lease.

Signature of Debtor 2

Official Form 108

Description of leased

Description of leased

Lessor's name:

property:

property:

Record # 708904

Statement of Intention for Individuals Filing Under Chapter 7

MM / DD / YYYY

Date

□No

Yes

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## DISCLAIMER Debtors have read and agree:

- Divorce or family support debts to a spouse, ex-spouse, child, guardian ad litem or similar person or entity in connection with a separation agreement, divorce decree or court order are not dischargable. Priority support debts must be paid in full in your Chapter 13 or it cannot be confirmed. DEBTS YOU AGREED TO ASSUME IN MARITAL SETTLEMENT AGREEMENTS are NON-DISCHARGEABLE if your ex-spouse files an adversary complaint, and the Judge rules that (a) you do not have the ability to pay the debt OR (b) discharging such debt would result in a benefit to you that outweighs the detriment to ex-spouse or your child. You agree to get advice in writing from your divorce attorney and send to us with copy of agreement. You must list any ex-spouse or spouse as a creditor. No guarantee any divorce debt is dischargeable. Property you are still on title to, or have a right to in a divorce, may be taken by a Bankruptcy trustee in a Chapter 7 and sold, or may be disposable income in a 13.
- Student loans and educational benefits are not discharged in Chapter 7 or 13 if government insured loan or owed to non-profit school unless you pay us to file a comptaint within the bankruptcy to prove repayment would be an "undue hardship", and win. Interest on student loans continue to run while you are in a Chapter 13.
- Cosigners, joint applicants, debts of persons other than debtor, debts incurred during marriage in community property states, or for family support are not discharged and joint, community or co-signers are not protected from collection unless you pay 100% of the debt. Creditors can collect from co-signors and put your bankruptcy on their credit report, and report them negatively to credit bureaus. You may prevent this by making the regular payments to the creditor. Creditors can liquidate collateral of your co-signer and refuse to continue payment in installments. Property you are joint on with other persons can be LIQUIDATED to pay your creditors.
- TAX DEBTS. Most taxes are not discharged in bankruptcy. However, income tax debt (1040 type tax) can be discharged if the following four rules are met: (1). The tax return was DUE at least 3 YEARS (plus extensions) before the filing of your bankruptcy case. (2). You FILED your income tax return at least 2 YEARS before your bankruptcy was filed. (You did not file a return if the tax authority or IRS had to file one for you, or if you didn't send the return to the District Director) (3). You did not wilfully intend to evade the tax. (4). The tax must have been ASSESSED over 240 DAYS before the bankruptcy filing. We recommend you meet with the IRS or state department of revenue to make sure all the conditions have been met, before you hire us or file a bankruptcy. Fraudulent taxes and taxes on unfiled returns can be discharged in a Chapter 13 case. Time in an offers in compromise, & time in bankruptcy plus 6 months, will extend the above time periods. Employers' share of FICA & FUTA is dischargeable, but not trust fund taxes like the employee's funds or sales tax.
- 5. Fines, traffic tickets, parking tickets, penalties to governmental unit are not discharged in Chapter 7, may not be discharged in 13 without full payment.
- 6. Non filing spouse: If you file individually, your spouse is not our client. Only your debts are discharged. If you want to protect a non-filing spouse, pay their bills or file a joint case with them. Family expenses (medical bills, rent and necessities may be collected from a non-filing spouse). Wisconsin, community property is liable for community debts. 7. DUI PERSONAL INJURIES, DEBTS YOU DON'T LIST are not discharged.
- 8. DEBTS where creditors successfully object to discharge may survive Creditors, the Trustee, or Court, can try to deny discharge based on many factors,
- a. Income sufficient to pay a percentage of your unsecured debt. b. Failure to keep books and records documenting your financial affairs. c. Luxury purchases or cash advances within 60 days of filing or without intent or ability to repay. d. Debts you made by false pretenses, breach of fiduciary duty, wilful and malicious injuries to others e. Benefit overpayments like aid or unemployment if a determination of fraud has been made before or during bankruptcy. f. Failure to appear at meetings, court dates, or co-operate with the Trustee.
- 9. INTEREST ON NON-DISCHARGEABLE DEBTS in a Chapter 13 continues to accrue, and CREDITORS WHO DO NOT FILE CLAIMS in your Chapter 13 plan within 90 days (180 days for governmental units) of the meeting of creditors, do not get paid. Your plan and their claim should provide for interest at contract rate, or you will have to pay the debt outside the Chapter 13 plan. Property taxes must be paid by you directly to avoid sale for delinquent taxes.
- 10. LIQUIDATION OF REAL AND PERSONAL PROPERTY. If you file a Chapter 7, any property that is not listed and claimed exempt on Schedule C pursuant to state or federal law is taken and sold by the trustee to pay creditors. You agree to assume the risk that your property will be taken and sold by the bankruptcy trustee (at or less than what it is worth) if we can't protect it under applicable state law. You get a discharge, but the trustee can take property not listed and exempted on schedules B and C and sell it for whatever price will provide some benefit to creditors.
- 11. CHANGE IN LAWS. Laws & court cases change constantly. We can file your case today if you pay us in full (some attorneys give credit, we don't) pay the filing fee and sign your petition in our main office. ANY DELAY either in hiring us, or after, IS YOUR REPSONSIBILITY. ADVERSE RULINGS Judges that sit in adjoining courtrooms can rule differently on the same facts. We can predict but can't guarantee a judge will or will not rule against you. You accept the risk of a judge ruling against you, as in any lawsuit.
- 12. PAYMENTS TO CREDITORS YOU PREFERRED to pay more than \$600 in front of others, within 1 yr if a relative or insider, or within 90 days if another creditor, so don't pay off debts to keep credit cards or protect others. TRANSFERS OF PROPERTY within 4 years that made you unable to pay your debts at the time can be reversed by a Trustee and the transferee will have to give back the property you transferred.
- 13. SURRENDER OF PROPERTY Bankruptcy gets rid of debts, but real estate, condos and time shares remain in your name until a foreclosure sale or the lender accepts a deed in lieu of foreclosure. Turn condo keys over to condo association or remain liable for assessments after filing, and make sure you keep buildings & land insured and maintained and secured until it is taken back by lender or out of your name. If you let a house go vacant and pipes explode or someone gets killed in there you may be liable.
- 14. RIGHT TO RECEIVE inheritances, tax refunds, injury claims, compensation of any kind, insurance or realty commissions, are property of the bankruptcy estate and you will surrender these to the trustee unless they are claimed exempt on Schedule C, and no objection to your claim of exemption is upheld. Do not deduct extra money from taxes so you are entitled to a refund, change your W-9 if necessary.
- 15. JOINT ACCOUNT HOLDERS holders entire amount in the account could be taken by the trustee under Chapter 7.
- 16. MARRIED COUPLES GOING THROUGH DIVORCE: We have been advised to seek independent counsel for our bankruptcy. We understand that Peter Francis Geraci does not represent us with regard to any divorce matters and does not make any representations regarding what will happen in divorce court. We have decided to file a bankruptcy together dispite the fact that we are getting a divorce and our interests could be adverse. We have agreed to cooperate with each other in this joint bankruptcy.
- 17. AUTO LEASES & INSTALLMENT AGREEMENTS to purchase things, leases and almost all contracts will be void after bankruptcy. They are "executory contracts", and if they are of no benefit to the bankruptcy estate and not assumed within 60 days of filing, they are void. Debtors have been warned of this, and unless there is a novation under state law, or agreement not to use bankrptcy to void the contract, the debtors rights under the contract are extinguished. Debtor agrees to be responsible for obtaining such agreements or losing rights under such contracts. Debtor agrees that his or her attorney will not file motions to assume such contracts.
- 18. Setoffs if you have money in a credit union or creditor account, or other loans that cross-collateralized, any money or property may be taken for both loans. The Undersigned have read the above & assume the risk that a debt is for discharged in bankruptcy, that our non-exempt property will be taken and sold by the bankruptcy trustee if it can't be protected, that the trustee finight object if live have excess income, or change in State, Federal or Bankruptcy laws before the case is filed in Court AND WE HAVE TO READ, CHECK, & MAKE SURE OUR PETITION IS ACCURATE!!!!

/2016 Dated:

Gregory Stephen Capra

Page 1 of 1

X Date & Sign

Case 16-14781 Doc 1 Filed 04/29/16 Entered 04/29/16 16:48:13 Desc Main Document Page 56 of 58

# UNITED STATES BANKRUPTCY COURT NORTHERN DISTRICT OF ILLINOIS EASTERN DIVISION

in re

Gregory Stephen Capra / Debtor

Bankruptcy Docket #:

Judge:

### VERIFICATION OF CREDITOR MATRIX

The above named Debtor(s) hereby verify that the attached list of creditors is true and correct to the best of our knowledge.

I DECLARE UNDER PENALTY OF PERJURY THAT THE FOREGOING IS TRUE AND CORRECT.

Dated: 4/29/2016

Gregory Stephen Capra

X Date & Sign

<sup>\*</sup> Joint debtors must provide information for both spouses. Penalty for making a false statement or concealing property: Fine up to \$500,000 or up to 5 years imprisonment or both. 18 U.S.C. 152 and 3571.

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| Debto                                   | 1 (               | Gregory                             | Stephen  | Capra                  | •                    | Case Number (if known) _   | <del>-</del>                           |                                |            |   |
|---|-------------------|-------------------------------------|--|------------------------|----------------------|----------------------------|--|--------------------------------|------------|---|
|   |                   | First Name                          | Middle Name  | Last Name              |                      |                            |  |                                | ***        | *************************************** |
|   |                   |                                     |  |                        | 20                   | Column A                   | Column E                               | 5.1050 <b>66</b> 4000000000000 |            |   |
|   |                   |                                     |  |                        |                      | Debtor 1                   | Debtor 2<br>non-filing                 |                                | ŧ          | *************************************** |
|   |                   |                                     |  |                        |                      |                            | 11031-131119                           | I apouse                       | Ä.         | -                                       |
|   | _                 |                                     | 41   |                        |                      | \$0.00                     |  | \$0.00                         |            |   |
| 8. <b>U</b> I                           | nempl             | oyment compe                        | ensation   | Lwas a honofit         |                      |                            |  |                                |            | *************************************** |
| D:<br>ur                                | o not e<br>der th | enter the amour<br>le Social Securi | nt if you contend that the amount received<br>ity Act. Instead, list it here:  |                        |                      |                            |  |                                |            | ***                                     |
|   |                   |                                     |  |                        |                      |                            |  | •                              |            |   |
|   |                   |                                     |  |                        |                      |                            |  |                                |            |   |
| F                                       | or you            | ır spouse                           |  |                        |                      |                            |  |                                |            |   |
|   |                   |                                     | t income. Do not include any amount rec  | eived that was a       |                      |                            |  |                                |            |   |
| 9. F                                    | 'ensio<br>enefit  | under the Soci                      | al Security Act.   |                        |                      | \$0.00                     |  | \$0.00                         |            | ***                                     |
| 40.1                                    |                   | . form all other                    | sources not listed above. Specify the s  | ource and amount.      |                      |                            |  |                                |            |   |
| i r                                     |                   | include any hel                     | nofite received under the Social Security.   | ACL OF DAYINGING TOO   | eived                |                            |  |                                |            |   |
|   |                   | otim of a war cri                   | ime, a crime against humanity, or internaty, list other sources on a separate page a   | lional or comesuc      |                      |                            |  |                                |            | *************************************** |
| 3                                       |                   |                                     |  | na parate total are    |                      | \$0.00                     | \$                                     | 0.00                           |            | *************************************** |
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|   | Oc. To            | tal amounts fro                     | m separate pages, if any.  |                        |                      | \$0.00                     |  | \$0.00                         |            |   |
| 111                                     | `aleul            | ate vour total (                    | current monthly income. Add lines 2 thro   | ugh 10 for each        |                      | \$1,646.67 +               |  | \$0.00 =                       | <u>-</u> [ | \$1,646.67                              |
| 11.                                     | columi            | n. Then add the                     | total for Column A to the total for Colum  | n B.                   |                      |                            |  |                                | _          |   |
|   |                   |                                     |  |                        |                      |                            |  |                                |            |   |
|   |                   |                                     |  |                        |                      |                            |  |                                |            |   |
| Pa                                      | rt 2:             | Determine                           | Whether the Means Test Applies to You  |                        |                      |                            |  |                                |            |   |
| 12                                      | Calcul            | ate vour curre                      | nt monthly income for the year. Follow t   | hese steps:            |                      |                            |  |                                |            |   |
| 1 -                                     | 2a.               | Copy your total                     | current monthly income from line 11  |                        |                      | . Copy line 11 here        |  | 12a.                           |            | \$1,646.67                              |
|   |                   |                                     | (the number of months in a year).  |                        |                      |                            |  |                                |            | x 12                                    |
|   |                   |                                     |  |                        |                      |                            |  | 12b.                           | *****      | \$19,760.04                             |
| •                                       | 2b.               | The result is yo                    | our annual income for this part of the form  |                        |                      |                            |  | <b></b>                        | ·····      |   |
| 13.                                     | Calcu             | late the media                      | n family income that applies to you. Foll  | ow these steps:        |                      |                            |  |                                |            |   |
|   |                   |                                     | •  |                        | <del></del> 7        |                            |  |                                |            |   |
|   | Fill in           | the state in whi                    | ch you live.   | <u>IL</u>              |                      |                            |  |                                |            |   |
|   | C:11 in           | the number of t                     | people in your household.  | 1                      |                      |                            |  |                                |            |   |
|   |                   |                                     |  | <u>'</u>               |                      |                            |  | Г                              |            | 040 744 00                              |
| -                                       | Fill in           | the median fan                      | nily income for your state and size of hou   | sehold                 |                      |                            |  | 13.                            |            | \$49,741.00                             |
| 1                                       |                   |                                     | modien incomo amounts ao Anline  | using the link specifi | eu III lile separate |                            |  |                                |            |   |
| *************************************** | instru            | ctions for this fo                  | orm. This list may also be available at the  | Darkingtoy Clerk's C   |                      |                            |  |                                |            |   |
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|   |                   | do the lines co                     |  |                        | . = :                | mention of obuse           |  |                                |            |   |
|   | 14a.              |                                     | ess than or equal to line 13. On the top of  | page 1, check box      | 1, There is no presi | трион от авизе.            |  |                                |            |   |
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| 9                                       | 14b.              | ine 12b is r                        | more than line 13. On the top of page 1, c   | heck box 2, The pre    | esumption of abuse   | is determined by Form      | 12271-2.                               |                                |            |   |
|   |                   | Go to Part 3                        | and fill out Form 122A-2.  |                        |                      |                            |  |                                |            |   |
| F                                       | art 3:            | Sign Belo                           | w  |                        |                      |                            |  |                                |            |   |
|   |                   |                                     | 70   |                        |                      | envettachmente is trus     | and correc                             | :t                             |            |   |
|   |                   | By signing he                       | re, I declare under penalty of perjury that  | the information on the | nis statement and in | arry attacriments is a de- | , una como                             |                                |            |   |
|   |                   | $\mathcal{Y}$                       |  |                        |                      |                            |  |                                |            |   |
| *************************************** |                   | 10                                  | THE  | <del></del>            |                      |                            |  |                                |            |   |
| +                                       |                   | 1///                                | Gregory Stephen Capra  | ;                      |                      |                            |  |                                |            |   |
| *                                       |                   | 14                                  | Transfer and the second | <b>;</b>               |                      |                            |  |                                |            |   |
|   | ß                 | Date::_                             | 4 129 12016  |                        |                      |                            |  |                                |            |   |
| · Parameter s                           |                   |                                     |  |                        |                      |                            |  |                                |            |   |
| *************************************** |                   | If you checke                       | d line 14a, do NOT fill out or file Form 12  | 2A-2.                  |                      |                            |  |                                |            |   |
| *************************************** |                   | If you checke                       | d line 14b, fill out Form 122A-2 and file it   | with this form.        |                      |                            |  | ·····                          |            |   |
| 1                                       |                   | ,                                   | •  |                        |                      |                            | ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,, |                                |            |   |

Form B 201A, Notice to Consumer Debtor(s)

In re Gregory Stephen Capra / Debtor

Page 2

found to have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge and, if it does, the purpose for which you filed the bankruptcy petition will be defeated.

Even if you receive a general discharge, some particular debts are not discharged under the law. Therefore, you may still be responsible for most taxes and student loans; debts incurred to pay nondischargeable taxes; domestic support and property settlement obligations; most fines, penalties, forfeitures, and criminal restitution obligations; certain debts which are not properly listed in your bankruptcy papers; and debts for death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs. Also, if a creditor can prove that a debt arose from fraud, breach of fiduciary duty, or theft, or from a willful and malicious injury, the bankruptcy court may determine that the debt is not discharged.

## <u>Chapter 13</u>: Repayment of All or Part of the Debts of an Individual with Regular Income (\$235 filing fee, \$75 administrative fee: Total fee \$310)

Chapter 13 is designed for individuals with regular income who would like to pay all or part of their debts in installments over a period of time. You are only eligible for chapter 13 if your debts do not exceed certain dollar amounts set forth in the Bankruptcy Code.

Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, using your future earnings. The period allowed by the court to repay your debts may be three years or five years, depending upon your income and other factors. The court must approve your plan before it can take effect.

After completing the payments under your plan, your debts are generally discharged except for domestic support obligations; most student loans; certain taxes; most criminal fines and restitution obligations; certain debts which are not properly listed in your bankruptcy papers; certain debts for acts that caused death or personal injury; and certain long term secured obligations.

### Chapter 11: Reorganization (\$1,167 filling fee, \$550 administrative fee: Total fee \$1,717)

Chapter 11 is designed for the reorganization of a business but is also available to consumer debtors. Its provisions are quite complicated, and any decision by an individual to file a chapter 11 petition should be reviewed with an attorney.

### Chapter 12: Family Farmer or Fisherman (\$200 filing fee, \$75 administrative fee: Total fee \$275)

Chapter 12 is designed to permit family farmers and fishermen to repay their debts over a period of time from future earnings and is similar to chapter 13. The eligibility requirements are restrictive, limiting its use to those whose income arises primarily from a family-owned farm or commercial fishing operation.

### 3. Bankruptcy Crimes and Availability of Bankruptcy Papers to Law Enforcement Officials

A person who knowingly and fraudulently conceals assets or makes a false oath or statement under penalty of perjury, either orally or in writing, in connection with a bankruptcy case is subject to a fine, imprisonment, or both. All information supplied by a debtor in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the United States Trustee, the Office of the United States Attorney, and other components and employees of the Department of Justice.

WARNING: Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information regarding your creditors, assets, liabilities, income, expenses and general financial condition. Your bankruptcy case may be dismissed if this information is not filed with the court within the time deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court. The

Gregory Stephen Capra

X Date & Sign

Dated: 129/2016

Attorney: Salvador Gutierrez

Form B 201A, Notice to Consumer Debtor(s)

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